A COMPARATIVE STUDY ON THE SELF-CONCEPT OF LEARNERS
WITH LEARNING DISABILITIES IN DIFFERENT EDUCATIONAL
SETTINGS

BY

Siphelele S Makhubu

STUDENT NUMBER: 20061117

A dissertation submitted to the faculty of Education in partial fulfilment of
the requirements for the degree of Master of Education (Educational
Psychology) in the Department of Educational Psychology and Special
Education at the University of Zululand

SUPERVISOR: Dr. S Govender

CO-SUPERVISOR: Professor M.M Hlongwane

©2014
DECLARATION

I hereby declare that the entirety of the work contained herein is my own, original work and that it has not been previously submitted to this university or any other university or any other institution for obtaining any qualification.

.............................................. ..............................................
Signature Date

Copyright © 2014 University of Zululand

All rights reserved
ABSTRACT

Self-concept is one crucial aspect of our lives that can shape how we develop during childhood and determine who we become as adults. Hence, it is important for children to develop a positive self-concept in order to better their chances of a happy and satisfying adulthood. Of particular interest are learners classified as learning disabled. These learners encounter more challenges in life than their normal peers.

Numerous studies have been conducted on the topic however, as far as it could be ascertained no research assessing the self-concept of learners with Learning Disabilities (LD) in different educational settings has been carried out in a decade. Furthermore, within the South African context, no studies on the topic have been reported to have been published. Hence, research on the self-concept of learners with LD is far more necessary in South Africa at this moment as the placement of such learners continues to take place.

Although placement in least restrictive settings is generally believed to be associated with more positive social outcomes for learners with disabilities, the empirical research has yielded equivocal findings. Learners with LD are commonly assumed to have poor self-concept than their non-LD counterparts. The purpose of this study was to determine whether differences exist between the self-concept of learners with LD in regular schools compared to their LD counterparts in special schools. A differential research design was employed, and results were examined across three independent variables namely, age, gender and ethnicity and class placement. A total of 126 learners from six different schools in the Kwa-Zulu Natal Province participated in the present study. This included 74 learners with varying degrees of learning disabilities in regular schools and 52 from special schools and remedial
schools. The results revealed no overall association between self-concept and educational placement. Learners receiving instructions in self-contained classrooms in regular schools exhibited lower self-concept compared to learners with LD attending special schools.

In conclusion the present study’s contributions as well as shortcomings are discussed, along with recommendations for future research.
DEDICATION

This work is dedicated to my parents, Buyisiwe and Zwelinjani Makhubu, for their unconditional and endless support. My gratitude to them cannot be sufficiently expressed either in words or in writing.
ACKNOWLEDGEMENTS

This study could only be completed with the assistance of others, and I would like to express my sincere gratitude and appreciation to the following people.

- Dr. S Govender, my supervisor for her advice and guidance, especially the time she spent proofreading, discussing and improving this research project.
- Professor M.M Hlongwane, my co-supervisor, for his patience, guidance, insight and his continuous support throughout the process of completing my dissertation.
- Kwa-Zulu Natal Department, for granting permission for this study.
- Headmasters and educators of respective schools for allowing me to conduct the research at their school and for all their assistance.
- My family, for their patience with me, words of encouragement and moral support, without which I may have given up this project long ago.
- Bheki Zondi from the Science Department for helping me with the statistics part of this project.
- Lisa, my colleague and friend, thank you for your support and for always going out of your way to help me wherever you could, it was really great working with you.
- To all the participants, without your help this study would not have been possible.
- Finally, to God All Mighty who has guided and protected me through hardships.
CONTENTS

Declaration.............................................................................................................. i
Abstract................................................................................................................ iii
Dedication.............................................................................................................iv
Acknowledgements............................................................................................ v
Contents.............................................................................................................. vi
List of Appendices............................................................................................... ix
List of Tables....................................................................................................... x
List of Figures...................................................................................................... xi
List of abbreviations........................................................................................... xii

CHAPTER 1 INTRODUCTION, MOTIVATION FOR AND AIMS OF THE STUDY.... 1
1.1 Introduction..................................................................................................... 1
1.2 Motivation for the study undertaken............................................................. 3
1.3 Ethical considerations..................................................................................... 6
1.4 Statement of the problem............................................................................... 7
1.5 The primary objectives of the study.............................................................. 9
1.6 Hypothesis..................................................................................................... 10
1.7 Definition of key terms and concepts........................................................... 10
1.8 Research methodology................................................................................ 12
1.9 Organisation of the dissertation.................................................................. 15
1.10 Chapter Summary........................................................................................ 16

CHAPTER 2: LITERATURE REVIEW................................................................. 17
2.1 Self-concept as a construct.......................................................................... 17
2.2 Self-concept and developmental features/age........................................... 20
2.3 Self-concept and gender............................................................................... 24
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.4 Structure of Self-concept</td>
<td>26</td>
</tr>
<tr>
<td>2.5 Measures of Self-concept</td>
<td>28</td>
</tr>
<tr>
<td>2.6 Learning Disabilities</td>
<td>29</td>
</tr>
<tr>
<td>2.7 Self-concept and Learning Disabilities</td>
<td>31</td>
</tr>
<tr>
<td>2.8 Self-concept, social competence, and peer acceptance</td>
<td>33</td>
</tr>
<tr>
<td>2.9 Self-concept, attributions, and achievement</td>
<td>37</td>
</tr>
<tr>
<td>2.10 Self-concept and Educational placement</td>
<td>40</td>
</tr>
<tr>
<td>2.11 Self-concept and Educational implications</td>
<td>46</td>
</tr>
<tr>
<td>2.12 Chapter summary</td>
<td>50</td>
</tr>
<tr>
<td><strong>CHAPTER 3: THEORETICAL FRAMEWORK</strong></td>
<td>51</td>
</tr>
<tr>
<td>3. Introduction</td>
<td>51</td>
</tr>
<tr>
<td>3.1 Systems theory</td>
<td>52</td>
</tr>
<tr>
<td>3.2 Bronfenbrenner’s ecological systems theory</td>
<td>52</td>
</tr>
<tr>
<td>3.3 Theories of development</td>
<td>56</td>
</tr>
<tr>
<td>3.2.1 Erikson’s theory of psychosocial development</td>
<td>56</td>
</tr>
<tr>
<td>3.2.2 Piaget’s theory of cognitive development</td>
<td>60</td>
</tr>
<tr>
<td>3.2.3 Bandura’s social learning theory</td>
<td>60</td>
</tr>
<tr>
<td>3.3 Chapter summary</td>
<td>62</td>
</tr>
<tr>
<td><strong>Chapter: 4 RESEARCH METHODOLOGY</strong></td>
<td>63</td>
</tr>
<tr>
<td>4.1 Introduction</td>
<td>63</td>
</tr>
<tr>
<td>4.2 Research design</td>
<td>64</td>
</tr>
<tr>
<td>4.3 Exclusion criteria</td>
<td>65</td>
</tr>
<tr>
<td>4.4 Participants</td>
<td>65</td>
</tr>
<tr>
<td>4.5 Measuring instrument</td>
<td>68</td>
</tr>
<tr>
<td>4.5.1 Piers Harris Children Self-concept Scale</td>
<td>68</td>
</tr>
</tbody>
</table>
LIST OF APPENDICES

APPENDIX A: DEPARTMENT OF EDUCATION: KWA-ZULU NATAL:

REQUEST FOR PERMISSION LETTER.

APPENDIX B: DEPARTMENT OF EDUCATION: KWA-ZULU NATAL

PERMISSION LETTER.

APPENDIX C: SCHOOL PRINCIPALS, REQUEST FOR PERMISSION

LETTER.

APPENDIX D: PARENT/ GUARDIAN PERMISSION LETTER.
LIST OF TABLES


TABLE 2: Depicts the demographic characteristics of the total sample as well as a Regular and Special Education groups.

TABLE 3: Provides the means, standard deviations and t-scores for the total sample.

TABLE 4: Provides Means and Standard deviations of total score for boys and girls in Regular and Special Education Classroom.
LIST OF FIGURES

**Figure 1:** Depicts the demographic of 126 participants according to their Educational placement (Regular and Special Education Classes)

**Figure 2:** Depicts the age distribution of 126 participants

**Figure 3:** Depicts the gender distribution of 126 participants

**Figure 4:** Depicts the cultural distribution of 126 participants
LIST OF ABBREVIATIONS

- (BEH) Behavioural adjustment
- (FRE) Freedom from anxiety
- (HAP) Happiness and satisfaction
- (INT) Intellectual and school status
- (KZNDOE) Kwa-Zulu Natal Department of Education
- (LD) Learning Disability
- (PHCSCS-2) Piers Harris Children Self-Concept Scale-2
- (PHY) Physical appearance and attributes
- (POP) Popularity
- (SPSS) Statistical Package for Social Science
CHAPTER 1

INTRODUCTION, MOTIVATION FOR AND AIMS OF THE STUDY

A general introduction with regard to the self-concept of learners with learning disabilities in different educational settings is provided in chapter 1. The motivation for, the statement of the research problem as well as the aims and the significance of the present study are then discussed. Lastly, the organisation of the dissertation is outlined chapter by chapter.

1.1 Introduction

The concept of change is never easy as it is not a single occurrence but a process that can take up to several years at times (Pottas, 2005). This entails redesigning and restructuring of systems and involves more than just programmes as it is primarily about accommodating individuals in an established system (White paper 6, 2001). As individuals are often entitled to their own established ways of thinking, dramatic changes in societies are often experienced differently by each participant. “Yet change is inevitable when innovative practices demonstrate greater effectiveness than past services” (Pottas, 2005, p.58).

The policy with regard to provision of education in South Africa has changed dramatically, with the primary objective of this change being to provide quality education for all learners including learners with disabilities (Engelbrecht, Green, Naicker, Engelbrecht, 1999). As a result, substantial changes have been seen in the education provided for such learners (Dixon & Marsh, 1997), including the movement away from segregated settings to the provision of education in least restrictive
settings. This was done with an attempt to bridge the gap to the prevalent disparities (between special and regular education) that were created by the education systems in the past (White paper 6, 2001). Furthermore, this involves regular schools genuinely adapting and changing in order to meet the needs of children with disabilities as well as accepting and valuing differences (Loreman, Deppeler & Harvey, 2005). Such development in our education, including the education of learners with disabilities initially followed the same trend as with many other European countries (Prinsloo, 2001). However, the influence exerted by the past apartheid system in our education as well as the diversity in our cultures and race distinguishes the development of our education from that of other countries (Engelbrecht, 2006, p. 254).

Inclusive education in South Africa was not merely promoted as yet another option for education but as an “educational strategy that can add value to a changing, diverse and democratic society” (Engelbrecht, 2006, p. 253). Therefore, one of the predominant objectives of our education system is that of ensuring that all learners, including learners with disabilities are given an equal opportunity to access quality education, regardless of their culture, race as well as disability in order to help them realise that they have potential to thrive in a diverse and constantly changing society (Engelbrecht et al, 1999). The acknowledgement by our constitution that education is a basic human right that should be easily accessible, underpins the notion that “our education systems have an obligation to promote, provide for and sustain such quality education for all learners” (RSA Constitution Act 108 of 1996, s29, p.1).

Historically, the education provided for learners with disabilities in our country was not given much consideration. Learners with and without disabilities were basically unequal with regard to their educational standards. Learners with disabilities were
subjected to segregation (Gwala, 2006). For years, education systems worldwide provided special education and related services to learners with disabilities (Pottas, 2005). However, over the past few decades there has been a strong trend towards provision of instruction in least restrictive educational settings for disabled learners (Elbaum, 2002), with specific attention given to those learners characterised as learning disabled as the issue pertaining to their placement in education has become more prevalent in education systems across the world (Dixon & Marsh, 1997). These are learners generally assumed to be eligible for inclusion with adequate support and resources put in place (Dixon & Marsh, 1997).

The educational settings in which such learners can be educated can range from regular to special educational services (Elbaum, 2002). However, the effects of inclusion or exclusion on the self-concept of learners with Learning Disabilities (LD) is yet to be determined as many aspects on the topic have not been adequately researched (Zyoudi, 2010). Of particular interest are the experiences of such learners in different educational settings, i.e. regular and special education setting. On the studies conducted on the topic, the research findings have proven to be equivocal. “It is thus vital for research to move beyond the exploration of the practices and impact of inclusion and study learners’ understanding, experiences and perceptions of different educational settings on personality aspects such as self-worth, confidence and self-respect” (Ntshangase, Mdikana & Cronk, 2008, p. 75).

1.2 Motivation for the study undertaken

“The Regular Education Initiative and the movement towards full inclusion have had extensive influence at both philosophical and policy level on the placement of children with disabilities” (Dixon & Marsh, 1997, p.1). In decades since Public Law
94-142 was passed, the education provided to learners with disabilities has to an extent been influenced by the policies put in place that support full inclusion (Dixon & Marsh, 1997). However, this has with no surprise created much controversy in education systems across the world (Elbaum, 2002). With the placement of learners with learning disabilities (LD) in different educational settings and the affects this might have on their overall self-concept being currently one of the primary education policy issues that has generated much debate (Zyoudi, 2010).

Initially, enthusiasm for mainstreaming was high as it was assumed that placing learners with learning disabilities in a regular classroom with their non-learning disabled peers would increase social acceptance, social competence and communication skill, hence positive self-concept for children with diverse disabilities. However, questions began to emerge about the effectiveness of serving learners with learning disabilities in a general classroom. Concerns about academic achievement, peer acceptance, and the preparation of general education teachers to accommodate learners with learning disabilities created controversy about the effectiveness of inclusive educational practices (Loreman et al, 2005). On the contrary, those who oppose the idea of separate educational facilities for learning disabled children argue that learners with learning disabilities in special school facilities seem to have lower self-concept when compared to their peers who receive their educational instructions in a regular classroom. This may be due to the stigma associated with special schools leading to a certain degree of labelling and consequently poor self-concept (Kapp, 1991).

Despite the significance of self-concept in learning either as a contributing cause or in itself an important outcome, very scant empirical research has been conducted on many aspects of self-concept (Leminen, 2002). Of particular interest, is the role
played by self-perceptions in academic achievement. A large body of research evidence indicates that there is a relationship that proves to be substantial between self-concept and academic achievement (Chapman, 1988). Although the issue pertaining the cause and effect between self-concept and achievement is yet to be determined, most researchers and educators agree that the manner in which these two constructs are interrelated is at least two-way (Chapman, 1988). Therefore, researchers have seen a necessity for further research that examines the effects of class placement on self-concept (Elbaum, 2002; Leminen, 2002).

How children perceive themselves during the fundamental years of schooling can later have negative consequences for their later development as well as their psychological well-being (Leminen, 2002). The experiences that children encounter at school have been acknowledged to play a very significant role in self-concept development (Zyoudi, 2010). Such experiences can have a huge impact on how children view and value themselves and how they will approach and react to future achievements and demands (Leminen, 2002; Zyoudi, 2010, Schmidt & Cragan, 2008).

A great number of studies have been conducted regarding self-concept of learners with LD in the past few decades. Research evidence indicates that more than 100 studies have been published on the topic (Chapman, 1988; Elbaum & Vaughn, 2003; Gans, Kenny & Ghany, 2003; Elbaum, 2002). However, most of the studies conducted have reported inconsistent finding on the relationship between learning disabilities and self-concept (Leminen, 2002). The results indicated that when compared to their normally achieving peers learners with learning disabilities appear to hold more negative self-concepts (Zeleke, 2004). Furthermore, Smith (2007) argues that, although comprehensive research has been conducted on the self-
concept of learners with learning disabilities, research in the South African context is still lacking. Apart from the lack of research in the South African context very limited research has been conducted internationally concerning the self-concept of learners with LD in different educational settings and the effect this might have on the self-concept of these learners (Smith, 2007).

Much of the research done on the topic compared the self-concept of learners with learning disabilities with that of their normally achieving peers. The most recent study conducted on the topic of self-concept of learners with learning disabilities in different educational settings was conducted over a decade ago in Florida Miami, by Elbaum, 2002. In her meta-analysis, Elbaum (2002) used 38 empirical studies related to the topic and found no systematic association between educational placement and self-concept (Elbaum, 2002). Based on the fact that current literature base on the topic is obsolete and due to the importance attached to self-concept and academic achievement both as an outcome and a mediating variable, further research on the topic is necessary.

1.3 Ethical considerations

The protection of human rights and dignity with regard to research is one of the foremost prerequisites when conducting research. As a result, one of the first principles of any research involving children is that of non-harmful procedures both physically and psychologically. To uphold to such standards the researcher did not impose any harmful methods in obtaining data for the present study. The well-being and interest of all participants was given high interest.

In keeping with the code of ethics and to avoid lawsuits, all participants’ signed a consent form as an indication that they agree to take part in the study and that they
understand all the terms underwritten in the contract. Furthermore, due to the sensitive nature of the study the researcher ensured that great care was taken for all the participants throughout the data collection process.

The researcher emphasized that participation was voluntary and if the participants wished to withdraw from participating at any time in the study, they had autonomy to do so. This was done to ensure that no harm was inflicted to the participants. The Child Guidance Centre at University of Zululand as well as the psychologist on site were utilised for counselling services if for any reason the participants experienced discomfort or distress during the course of data collection. Anonymity was maintained throughout the course of this study. Lastly, data collected is kept in a safe place where only authorised personnel have access.

1.4 Statement of the problem

The concept of self has long been an intriguing issue in research of school going children. Studies on self-concept, particularly the self-concept of children with learning disabilities have gained momentum in the past few decades (Hespe, 2006). Research indicates that learners with LD constitute about 2%-10% of the population (APA, 2000). In overall about 50% of children placed in special education classes are assumed to have learning disabilities.

Self-concept is one personality aspect which is believed to have pervasive influence on human emotion, cognition, behaviour and motivation (Ntshangase, Mdikana & Cronk, 2008). For years research has demonstrated that learning disabilities are known to affect self-esteem, psychological well-being as well as socialising skills for learners who are diagnosed with learning disabilities (Zyoudi, 2010). Moreover, research evidence suggests that psychological disorders are mostly common
amongst learners diagnosed with a learning disability when compared to their counterparts without the condition (Bear, Minke & Manning, 2002). This may be due to the difficulties experienced by learners with LD involving failure to accomplish certain tasks, as well as humiliation, and rejection all of which attributes to low self-worth (Hespe, 2006). Thus, self-perceptions and evaluations that individuals hold true about themselves and their competences are vital and can be pervasive as they may have influence on all other aspect of an individual as well as psychological well-being (Shaffer, 2006).

Positive self-concept not only is it vital for learners academic achievement but for their long term general well-being and personal development as well. Heyman (1990) reports that negative self-concept has been associated with depression for many learners especially those learners who struggle academically. This can result in feelings of inadequacy and incompetence in many spheres of life. In addition, research has indicated that learners with poor self-concept are easily prone to the use of maladaptive strategies such as self-handicapping and learned helplessness at school whilst their peers with more positive self-concept use more adaptive strategies (Ntshangase et al, 2008).

As mentioned above, learners with learning disabilities are assumed to have poor self-concept when compared to their normally achieving peers. This may be due to significant school difficulties they experience both academically as well as socially, especially those learners in regular schools (Ntshangase et al, 2008). Due to their history of continuous academic failure learners with LD tend to develop feelings of learned helplessness as a result they perceive themselves as less adequate than their normally achieving peers.
Depending on the severity of their condition a wide variety of placement options have become accessible for learners with LD. This may include a regular class with a remedial class, remedial schools as well as special education. However, previous studies have reported inconsistent findings about the relationship between different educational settings and self-concept (Leminen, 2002; Elbaum, 2002). As a result of such ambivalent or mixed outcomes in research this research paper attempts to evaluate the self-concept of learners with LD in different educational setting as well as explore their experiences with the aim to verify result from previous research and add more information on those existing studies. Therefore, the purpose of the study is to compare different aspects of self-concept between learners with learning disabilities in different educational settings. The following are the questions that this research attempts to answer.

1.5.1 Is there any difference in self-concept between regular class and special class learners?

1.5.2 Is the any existing relationship between educational placement (i.e. inclusive vs. special education) and self-concept of learners with LD?

1.5.3 Are the following characteristics of the participants, namely gender, age, ethnicity and grade interrelated to self-concept?

1.6 The primary objectives of the study are:

1.6.1 To determine if there is any difference in self-concept between regular class and special class learners.

1.6.2 To investigate and determine if there is any relationship between different educational settings and the self-concept of learners with learning disabilities.
1.6.3 To determine if the following characteristics of the participants, namely gender, age, ethnicity and grade are interrelated to self-concept.

1.7 Hypothesis

In connection with the above mentioned objectives the following hypothesis has been formulated.

1.7.1 There is a difference in self-concept between regular class and special class learners.

1.7.2 There is a relationship between different educational settings and the self-concept of learners with learning disabilities.

1.7.3 The following characteristics of the participants, namely gender, age, ethnicity and grade are interrelated to self-concept.

1.8 Definition of key terms and concepts

The following terms central to the present study are defined:

1.8.1 Self-concept

For the purpose of this research self-concept was defined as an individual’s ‘general composite or collective views of themselves across multi-dimensional sets of domain specific perceptions. These perceptions are based on self-knowledge and evaluation of value or worth of one’s own capabilities formed through experiences and interpretations of the environment” (Sternke, 2010, p.15).
1.8.2 Learning Disabilities

For the purpose of this research learning disabilities are defined as “a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematic abilities. Problems with self-regulatory behaviours, social perception, and social interaction may exist with learning disabilities, but do not by themselves constitute a learning disability” (Hammill, 1990, p.77).

**DSM-IV definition of Learning Disorders**

"Learning Disorders are diagnosed when the individual’s achievement on individually administered, standardized tests in reading, mathematics, or written expression is substantially below that expected for age, schooling, and level of intelligence." (APA, 2000, p. 49)

"Substantially below is defined as a discrepancy of more than 2 standard deviations between achievement and IQ." (APA, 2000, p. 49)

"If a sensory deficit is present, the learning difficulties must be in excess of those usually associated with the deficit." (APA, 2000, pp. 49-50)

1.8.3 Different educational settings

For the purpose of this research paper, different educational setting refers to regular education setting as well as special educational setting.

1.8.3.1 Regular educational setting

For the purpose of the present study, regular education refers to a classroom of learners without barriers to learning (Engelbrecht *et al*, 1999). Since the
implementation of inclusive education, such educational setting may also accommodate learners with barriers to learning provided that extra support and resources are put in place in order to maximize the potential of all learners.

1.8.3.2 **Special educational setting:** refers to the environment where learners with special needs due to severe learning difficulties, physical disabilities or behavioural problems are educated. Ideally, this involves individually tailored and systematically monitored arrangement of teaching procedures, adapted equipment and materials, accessible settings and other interventions designed to help learners with special needs achieve a higher level of self-sufficiency and success in school (Kapp, 1990)

1.9 Research methodology

1.9.1 Research design

The present study is descriptive in nature, hence a differential research design was deemed appropriate for use in the present study. Differential research design is used to “describe systematically the facts and characteristics of a given population or area of interest factually or accurately” (Isaac & Michael, 1977, p. 18). Furthermore, this design is most suitable for use in research studies that compare two or more groups that are differentiated on a basis of a pre-existing participant variable (Bensch, 2009). This research method is most effective for use in conditions where “the manipulation of an independent variable is not feasible or is impractical” (Bensch, 2009, p.45). In the present study the manipulation of the main classified variable (Learning Disability) was impractical, hence the use of differential research design was assumed to be most adequate.
1.9.2 Sampling method

Convenience sampling method was used in the present study. Participants were chosen on the basis of their suitability, availability and articulateness in the present study. Only those participants that were most suitable to make a meaningful argument and comparisons pertaining to research question were used. Learners who took part in this study were selected from different educational settings (Special and Regular Schools), hence, educational setting was used to assign children into groups.

1.9.3 Instrument

The Piers Harris Children Self-Concept Scale- II (PHCSCS-II) was used to collect data for the present study. Permission was sought from the University of Zululand (Child Guidance Clinic) to utilize the instrument. The Piers Harris Children Self-concept Scale-II is a 60 item self-report questionnaire used to assess learner’s conscious self-perceptions and self-attitudes, subtitled “THE WAY I FEEL ABOUT MYSELF” (Piers & Herzberg, 2005).

The answers in PHCSCS-II appear in a “dichotomous “Yes” or “No” form, allowing the scale to be easily understood by participants” (Leminen, 2002, p. 11). The PHCSCS-II is appropriate for use in any research, educational or clinical setting that requires an efficient quantitative analysis of children’s reported self-concept (Piers & Herzberg, 2005) “The PHCSCS-II’s usefulness and adequacy as a research instrument has been widely documented” (Gans, Kenny & Ghany, 2003, p.289) and “overall the PHCSCS-II has received substantial clinical use and has been recommended over the measures of self-concept” (Gans et al, 2003, p.291).
The PHCSCS-II is appropriate for use with children aged 7 to 18, with at least grade 2 reading level (Piers & Herzberg, 2005). As some of the children in this study had difficulty with reading, the questions were read aloud to them by the assessor.

The PHCSCS-II provides individual information on six domain scales (Keith & Bracken, 1996, p. 105).

- Behavioural adjustment (BEH)
- Intellectual and school status (INT)
- Physical appearance and attributes (PHY)
- Freedom from anxiety (FRE)
- Popularity (POP)
- Happiness and satisfaction (HAP)

This will be discussed further in chapter 4.

1.9.4 Data Analysis

The data in the present study was analysed using the Statistical Package for Social Science (SPSS). The statistical package data for social analysis is easy to use and it will be easy for the researcher to avoid mistakes. Furthermore, the SPSS is time efficient hence data analysis will be done in a short period of time. The survey instruments was appropriately coded. To ensure accuracy all data entries were checked by the researcher. Descriptive statistics was used to explore data in this study. Based on the fact that the majority of the questions in the survey are categorical in nature, descriptive analysis involved frequency counts. To determine if there was a significant relationship between the variables of interest the Spearman Rank Order Correlation Test was used.
1.9.5 Procedure

The Kwazulu Natal Department of Education (KZNDOE) was approached with the request to grant permission to conduct the present study. Once the permission was granted by the KZNDOE, contact was then made with the relevant schools as well as their governing bodies in order to obtain their permission to conduct the study on the school premises as well as for the school to identify those learners who are most suitable for the present study. Parental consent as well as learners assent was sought from all the participating individuals. The research was conducted only at times appropriate for learners as well as the school. Schools identified were visited for a process of data collection.

1.10 Organisation of the dissertation

Chapter 1 is comprised of an introduction to the dissertation. The motivation for the research is stated and the significance of the present study is outlined. The broad aims of research and research problem are highlighted. Operational definitions significant to the study are discussed to facilitate clarity on the topic. Lastly, an overview and organisation of the dissertation is provided.

Chapter 2 provides literature review based on previous findings on the topic with particular interest on the self-concept of learners with learning disabilities in different educational settings.

The theoretical framework for the study is outline in chapter 3. Relevant theories of development such as Bronfenbrenner’s systems theory, Piaget’s cognitive development theory, Erickson’s psychosocial development theory and social learning theory by Albert Bandura were discussed further in this chapter.
In **Chapter 4** the methodology used to obtain and analyse research data is outlined and discussed.

**Chapter 5** entails reporting of the results obtained. The main findings are presented as they pertain to different aspects of self-concept on the PHCSC-II. The results are then further discussed. Lastly, the general findings of the present study are summarised and the limitations and recommendations for future research are also provided.

**1.11 Chapter Summary**

Numerous aspects of this dissertation are discussed in chapter 1. These entailed the introduction of self-concept research in children with learning disabilities, the motivation to undertake the present study and the statement of the research problem and lastly, the organisation of the dissertation outlined chapter by chapter.

In chapter 2, a relevant literature regarding the self-concept of learners with learning disabilities is provided.
CHAPTER 2

LITERATURE REVIEW

2. Introduction

The chapter provides an overview of relevant literature with a view to determine whether learners with learning disabilities receiving their educational instruction in a regular classroom environment would obtain significantly higher self-concept scores in comparison to those learners who receive their education from special education setting. The chapter begins with a brief overview of literature pertaining to self-concept as a construct, followed by the discussion on the assessment tools used to measure self-concept, particularly focusing on the Piers Harris Children Self-Concept Scale. Research on learning disabilities and self-concept with reference to the following independent variables, namely, age, gender, and culture will then be discussed. Lastly, the importance of academic achievement in enhancing self-concept and how the two are interrelated will then be discussed.

2.1 Self-concept as a construct

Over the past few decades, studies on self-concept have been extremely prominent (Hespe, 2006). Since the mid-1970 numerous studies have been conducted on the topic and this may be due to the significant role played by self-concept in development as well as in academic achievement (Zeleke, 2004; Hespe, 2006). However, considerable debates have emerged relating to some aspects of self-concept. Of particular interest is the issue of defining the concept itself and this has created much controversy in literature as there is little consensus amongst
researchers with regard to the definition of self-concept except for that it is a complex multi-dimensional construct (Smith, 2007).

In literature, terms like “self-concept”, “self-perceptions”, “self-esteem, “self-image”, “self-evaluations”, “self-understanding”, “self-worth”, and “self-regard” have been used to refer to an individual’s feelings and cognitions about self (Leminen, 2002; Sternke, 2010, Smith, 2007). These terms are often used interchangeably as they overlap, yet still referring to and describing different aspects of the more general self-concept (Byrne, 1996, p.2-7; Leminen, 2002, p.4).

A large body of research conducted on self-concept has indicated that self-concept is not a single construct but an umbrella term that encompasses a broad range of definitions and meanings (Demo, 1992; Elbaum & Vaughn, 2001; Leminen, 2002; Zeleke, 2004). Byrne (1984) defined self-concept as the individual’s perception of themselves involving attitudes, feelings and knowledge about one’s skills, abilities, appearances and social acceptability. In a recent study by Sternke (2010) self-concept is defined as “an individual's general composite or collective view of himself or herself across multidimensional sets of domain specific perceptions, based on self-knowledge and evaluation of value or worth of one's own capabilities formed through experiences with and interpretations of the environment” (p. 15).

In both definitions mentioned above, there is consensus amongst researchers that self-concept refers to an individual’s perceptions in a variety of domains that are primarily influenced by one’s immediate environment. These perceptions are commonly based on knowledge about oneself and the way a person views and values his or her own capabilities in comparison to others in the similar environment or in same age group (Schmidt & Cragan, 2008). Thus, it can be said that self-
concept develops as a result of one’s experience within the environment and one’s evaluation and interpretation of such experiences (Sternke, 2010). This is developed at an early age through the influences of significant others (i.e. Parents or guardians). For example gender role stereotyping by parents as well as concrete feedback on personal attributes may to a certain extent build an early self-image upon the child.

The phenomenological approach in psychology attempts to understand how the individual perceives himself or herself in relation to others. This approach is based on the assumption that what an individual perceives to be a reality is actually based on his or her perception of things. Rogers (1950) a phenomenological theorist, believed that self-concept may be thought of as an organised configuration of perceptions of the self which are entirely conscious (cited in Burns 1982, p. 8). He proposed that self-concept “is composed of such elements as the perceptions of one’s characteristics and abilities; the perceptions and concepts of the self in relation to others and to the environment; the value qualities which are perceived as associated with experiences and objects; and the goals and ideals which are perceived as having positive or negative valence.” Thus, self-concept is assumed to be a learned, conscious sense of being separate and distinct from other people and things (Leminen, 2002). Furthermore, self-concept has been assumed to be a key component to a happy and satisfying childhood. However, research evidence suggests that a positive self-esteem also has a vital role to play in improving a child’s sense of worth (Sternke, 2010). By self-esteem Coppersmith (1967, p. 4-7) means “the evaluation that an individual makes with reference to himself, it infers to an attitude of approval or disapproval and indicates an extent to which the person believes himself to be capable, significant, successful and worthy”.
Like many other different aspects of personality, self-concept, self-perception or self-esteem is also expected to carry both positive and negative implications as individuals often experience and interpret things differently and that can have a bearing on intellectual and motivational processes (Leminen, 2002). The significance of self-perception for growth and development in children has been demonstrated in studies showing how self-efficacy can improve or impair the level of cognitive functioning as well as performance at school. The expectations that children have about their own capabilities may determine their behaviour as well as how they react in difficult situations and this can greatly influence the child’s level of motivation, determination and persistence regarding both the difficulty of the task and task efficacy.

2.2 Self-concept and developmental features/age

As children proceed through different stages of development, they encounter numerous changes and challenges. In addition to their physical and cognitive maturation, personality traits are also considered very important throughout the development process. Particularly, the development of self-concept as it is central in the process of development and can greatly influence how we develop during childhood as well as determine who we become as adults (Sternke, 2010).

According to Sternke (2010) the development of self-concept mainly occurs through constant interaction between the child’s innate personal attributes and their physical and social environments (Donohue, Wise, Romski, Henrich & Sevcik, 2010). As children develop, they begin to cultivate the concept of “me” and as they interact with and gain experience in the world their self-concept is affected. However, the sequence in which the development of self-concept occurs is presently unclear.
(Crain, Bracken & Bruce, 1994). The issue pertaining to whether or not self-concept shows normative changes with age has long been debated in research. However, the arguments surrounding the issue have not led to any agreement amongst researchers (Orth, Trzesniewski & Robins, 2010).

In research conducted on self-concept and age, some researchers have concluded that self-concept has shown age related changes from childhood to adolescent (McMullin & Cairney, 2004; Robins, Trzesniewski, Tracy, Gosling & Potter, 2002; Orth et al, 2010). Other researchers have concluded that self-concept does not show any systematic increases or decreases at any point in development; however change does occur eventually in response to important transitions in life for example maturation in physical and cognitive development (Demo, 1992; Robins et al, 2002; Twenge & Campbell, 2001). Thus it is clear that self-concept change in ordinary development in response to environmental and developmental changes (e.g. change in physical structure, cognitive abilities as well as many other areas, including academic skills, communication and language skills, and social skills) (Shaffer, 2006).

According to Burns (1982) the main component of self-concept in early childhood is the body image. At this stage the focus is more on physical appearance of things, therefore self-concept during this stage is influenced by concrete observable behaviours and characteristics (Alpay, 2000). Furthermore, during this stage children perceive personal characteristics in relation to certain specific behaviours (Woolfolk, 2007). In an attempt to describe the self the child is likely to mention his or her personal preferences, possessions and specific skills that he or she possesses. That is, children at this stage are unlikely to make self-evaluation in comparison to others (e.g. peers or society), thus issues surrounding the ideal self and self-worth are
unimportant to the child (Alpay, 2000). However, evidence suggests that parents can have a very influential role to play in the development of self-concept at this stage. That is probably because in early childhood parents or guardians are the primary source of support and children often look up to them.

In middle childhood, significant others, immediate family members, skills, and beliefs become more crucial components in shaping the self-concept. It is at this stage where children begin to view and value themselves and their capabilities through the eyes of others or in comparison to others (Marsh, 1989). This suggests that self-concept becomes increasingly differentiated as children grow older. Furthermore, the gap between real and ideal self swells up by age (Alpay, 2000). Therefore, age appears to have a significant role to play on children’s perceptions of their abilities, although many researchers believe that it is not age per se that is responsible for changes in the development of self-perceptions but cognitive maturation and life experiences that takes place as children proceed through different stages of development.

Damon and Harter (1986) conducted a longitudinal study on self-concept and age; their findings strongly supported the systematic and predictable nature of self-concept during childhood and adolescent. Correspondingly, in a study conducted by Marsh (1989) the findings suggested systematic age affect in self-concept development, the scores declined in early pre-adolescent to middle adolescent, then increase again through early adulthood.
<table>
<thead>
<tr>
<th>STAGE OF DEVELOPMENT</th>
<th>DOMINANT SELF-DESCRIPTION</th>
<th>EXAMPLES</th>
<th>ACHIEVEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early Childhood (2-6 years)</td>
<td>Observable Characteristics. Specific interest and activities.</td>
<td>I am a girl. I have brown hair. I like playing basketball.</td>
<td>Specific competence judgement of peers. Undifferentiated, Inaccurate competence self-judgement.</td>
</tr>
<tr>
<td>Adolescence (12-18 years)</td>
<td>Hidden abstract “psychological” qualities</td>
<td>I am moody. I am self-conscious.</td>
<td>Continuing differentiation of competence self-judgements</td>
</tr>
</tbody>
</table>
2.3 Self-concept and Gender

Gender differences in achievement, abilities and performance in various areas have long been a topic of interest in research (Meece, Glinke & Burg, 2006). Numerous studies pertaining to self-concept and gender differences have been conducted. However, the issue with regard to whether males and females differ in their self-concept is yet to be determined (Jackson, Hodgde & Ingram, 1994). Several studies suggest boys tend to maintain higher expectations and positive self-concept about their academic success than do girls, however, opposite findings have been reported by other studies. It has been suggested in some studies that gender differences in children tend to be domain-specific (Marsh, 1989). That is, girls who underestimate their competence may be domain specific (Manning, 2007). Furthermore, girls with high ability to achieve were reported to be more prone to failure than boys of equal ability (Dweck, 1986) as they tended to undervalue their competence skills after experiencing failure once even if the tasks are within their ability level.

In a study conducted by Burns (1982) on gender and self-concept, the findings suggested that when compared to boys, girls generally displayed lower global self-concept. However their scores were higher in the academic domain. Chapman's findings were consistent with those obtained by Burns. However, Cole, Martin, Peeke & Fier (1999) found no evidence that boys and girls differ in their global self-concept at any age level.

In a classic volume conducted by Maccoboy and Jacklin (1974), gender differences in learners perceptions in the domain of academic competence were observable, favouring girls in verbal abilities and performance and boys in mathematics and spatial ability. The physical skills domain was also observed. The findings suggested
that after the stage of puberty boys performed better than girls in activities that involved physical strength and power. On the other hand girls were found to be less likely to participate in activities that require physical strength and power. Furthermore, the degree to which cultural stereotypes are endorsed by children with regards to which sex is likely to be most talented in each domain predicts the extent to which girls and boys distort their ability self-concept and expectations in gender stereotypic direction (Manning, 2007). Thus, girls who believe that they do not fair-well than boys in certain tasks are more likely to have more negative competence beliefs. These sex differences in beliefs are very significant with respect to gender differences in cognition because competence beliefs relates strongly to individual performance on different tasks or activities. When individuals believe they are competent they are more likely to continue participating in an activity; when they are less confident they are more likely to discontinue the activity. Such choices could impact cognitive development and in a process promote feelings of worthlessness, hopelessness and lower levels of self-concept.

In a longitudinal study conducted in third and sixth graders regarding their academic competence, feelings of depression, and symptoms of anxiety (Cole, Martin, Peeke & Fier, 1999), the findings indicated gender differences in children's perceptions of their academic competence emerged, such that boys overestimated and girls underestimated their academic competence. Such gender differences may be a result of depression and anxiety tendencies in girls. In other words, learners underestimating their academic competence tended to report higher levels of negative self-concept.
2.4 Structure of self-concept

Literature regarding self-concept indicates that there are two models that have guided research in the area, namely, uni-dimensional and multi-dimensional models (Zeleke, 2004). However, the term self-concept has often been misinterpreted and used incorrectly as self-concept was believed to be unitary and single rather than multi-dimensional or multi-faceted (Leminen, 2002). Hence, uni-dimensional self-concept models were predominantly employed in research over the past few decades. According to this model only one factor of self-concept exist, that is general self-concept or global self-worth that is mainly concerned with one’s global sense of well-being as a person and general satisfaction with oneself (Zeleke, 2004). However, with advances in modern research methods self-concept has been shown to be a multi-dimensional rather than a uni-dimensional construct. That is self-concept can be measured and assessed across a variety of domains for example: academic, physical and social (Harter, 1996; Hartie & Marsh, 1996).

Shavelson, Hubner & Stanton (1976) divided self-concept into two components: academic and non-academic which are than in turn correspondingly divided into more specific facets as self-concept is assumed to possess both global and specific components. For example, within the non-academic component of self-concept the self is measured in three different aspects (i.e. social, emotional and physical) whilst on the academic domain of self-concept, individuals hold separate self-concepts for each academic area such as reading, maths and problem solving, which combine to create a more general concept of their academic abilities (Leminen, 2002).

Unlike the above mentioned model proposed by Shavelson et al (1976), Bracken (1996) emphasized the importance of the multi-dimensional /multifaceted nature of
an individual’s self-concept as it can be very complex to make comparisons between self-concept and other variables if the multi-complex nature of self-concept is not put into consideration. Bracken believed that self-concept is formed as a result of one’s experiences through interaction with others in a variety of setting domains. Children form their unique self-concept through feed-back from significant others whether direct or indirect regarding children’s own behaviour within six primary environmental contexts: social, competence, affect, academic, family and physical as self-concept is viewed from a multi-dimensional perspective.

Harter’s (1996) model of self-perception is deemed most suitable for the present study. This model conceptualizes self-concept as comprised of the following aspects: scholastic competence, social acceptance, physical appearance, behavioural conduct as well as separate global domain (Leminen, 2002). This model was devised with a view to tap children’s judgement in a variety of specific domains of their competence abilities as well as a global perception of their self-worth as it is believe that the multi-dimensional nature of self-concept does not exclude the existence of the general global self-concept (Zeleke, 2004). In addition, Harter maintained that self-perceptions reflect a variety of specific domains that are different distinct (Zeleke, 2004). To support this notion, Leminen (2000) in her study demonstrated that individuals can make global judgements of their worth as well as provide specific self-evaluations across a variety of domains. This excludes very young children as they perceive things differently.
2.5 Measures of Self-Concept

The assessment tools used to measure self-concept in children have had extensive influence from psychology as well as other related fields in social sciences. This may be due to the value and importance given to self-concept in education systems across the globe. Self-concept is widely believed to be central in a learning process either as a contributing cause or as an important outcome (Chapman, 1988).

As mentioned earlier on, numerous definitions and theoretical models have been applied in research pertaining to self-concept. In those studies conducted, two models of self-concept have guided research in this area, namely uni-dimensional as well as multi-dimensional perspectives. However, in recent years researchers have reached a consensus that self-concept is a multi-dimensional construct. That is self-concept can be assessed across a variety of domains i.e. academic, social and physical. As a result the multi-dimensional model of self-concept is the most widely used method.

Given the multi-dimensional nature of self-concept and advances in research methodology, numerous assessment tools have been developed and employed in research to explore and evaluate the self-concept of learners with learning disabilities. Furthermore, the importance of selecting the appropriate self-concept assessment instrument in accordance with the adopted theoretical framework has been emphasized in research to increase validity and consistency in research outcome (Zeleke, 2004). The instruments used in research to measure self-concept in learners with learning disabilities include: self-concept survey checklists, parental and teacher reports, semi-structured interviews with children and observational investigations. These can be grouped according to their relevant purpose such as
individual evaluation, research, clinical diagnosis and assessment, intervention planning, target population, or level of specification (e.g. general, academic, social, competence and physical) (Leminen, 2002).

Approximately 30 instruments have been designed and used to measure self-concept in children. The most widely used are the self-concept surveys checklists, with the Piers Harris Children Self-Concept Scale being the most widely administered tool when measuring the self-concept of learners with learning disabilities (Smith, 2007). A large body of research have supported the presumption that the multidimensionality of self-concept is more apparent in children aged 8-14 years than for younger children. This may be due to the increasing ability to differentiate and describe one’s behaviour in relation to a variety of life domains (Leminen, 2002). The Piers Harris Children Self-Concept Scale –II will be utilised in the present study as it is consistent with the multi-dimensional model of self-concept and with the age group of the sample that will be used in this study. It assesses self-concept in a wide variety of domains such as behaviour, intellectual, physical, appearance/attributes, anxiety, popularity and happiness and satisfaction domains. The PHCSCS-II also consists of a global self-concept score which is established on the basis of all the various sub-scale scores. The PHCSCS-II will be further discussed in chapter 4.

2.6 Learning Disabilities

In research conducted on learners with learning disabilities very few topics have evoked much interest or controversy as those pertaining to the definition of the condition (Hammill, 2001, p. 74). Kirk (1962) defined learning disability as “a retardation disorder, or delayed development in one or more of the processes of
speech, language, reading, writing, arithmetic or other school subject resulting from a psychological handicap caused by a possible cerebral dysfunction and or emotional or behavioural disturbances. It is not the result of mental retardation, sensory deprivation or cultural instructional factors” (p. 263)

Since then advocates of inclusive education, psychologists and governmental agents have tried to develop a valid and widely acceptable definition of learning disability (Hammill, 2001). However, researchers have not reach a common ground when it comes to defining the term as a result considerable variations still exist in the definition (Hoogeveen, Van Hell & Verhoeven, 2009). This has resulted in numerous definitions to have been applied in literature since the needs; purposes and discipline vary in research and practise (Hammill, 1990). Irrespective of the wide variety of definitions regarding learning disabilities Lerner (1993) have found common nominators among several existing definitions: a) neurological dysfunction, b) uneven growth pattern, c) difficulty in academic and learning tasks, d) discrepancy between potential and achievement, and e) exclusion of other causes.

As defined by Hammill (1990, p.77) the term Learning disabilities is a “general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, writing, reasoning or mathematical ability or written skills”. Problems with self-regulatory behaviours, social perception, and social skills may exist with learning disabilities, but do not by themselves constitute a learning disability (APA,2000). In addition, there is a possibility of problems with attention, motor perception or cognitive abilities. Thus, it can be said that learning disability is not a single condition but highly individual and can manifest itself in a variety of behaviours and characteristics (Lerner, 1993).
2.7 Self-concept and Learning Disabilities

For numerous reasons it is generally expected that children classified as learning disabled would have negative global, social and particularly school related academic self-concept (Leminen, 2000). By definition, learners with learning disabilities experience difficulties in specific areas of learning (Bear et al, 2002). To support this notion, Leminen (2002), states that it is commonly the case that learners classified as learning disabled have at some point experienced considerable failure and negative competence feedback at school. As a result of their history of continuous failure at school many learners with learning disabilities may perceive themselves less competent as they are likely to believe that they are not in control of their academic outcomes (Ntshangase et al, 2008). For example, repeated failure in different academic areas may result to low-self-concept. A learner with low self-concept may develop a tendency of learned helplessness. They may not attempt to perform a task at which they could be successful because of the belief that they will not succeed. The few areas in which learners experience mastery, the more negative their self-concept may become (Kloomok & Cosden, 1994).

In addition to the academic difficulties experienced by these learners, they also demonstrate behavioural problems, social skills deficit as well as peer rejection (Karvale & Forness, 1996; Zyoudi, 2010; Kuhne & Wiener, 2000). These experiences are more likely to be internalised and be represented in a more negative view of self. In a meta-analytic review conducted by Prout, Marcal and Marcal (1992) their findings suggested that when compared to their non-LD peers learners with learning disabilities tended to report in a more negative direction. However, it is not always the case that learners with learning difficulties will demonstrate low self-worth
therefore the results must always be interpreted with caution for several reasons. Firstly, many researchers have argued that being labelled or classified as learning disabled may cause great harm to an individual. The very fact of being labelled may have negative implications for one’s self-concept. This can either be direct or indirect through the mechanism of self-fulfilling prophecy. Secondly, the movement from a regular classroom to a special class or remedial class may create social stigma as it highlights a sense of being different from others. Furthermore, other researchers pointed out that the discrepancy from findings resulted from failure to view self-concept as a multi-dimensional construct and lack of validity/inherent weaknesses on the part of the measuring instruments. Cooley and Eyres (1988) supported this notion by suggesting that lower academic self-concept was the very source of differences found when learners with LD were compared with their normally achieving peers and that the controversial findings were caused by the fact that global measures of self-concept contain items referring to academic self-concept. The argument had its basis on the fact that when the academic component was eliminated the inconsistency in the global self-concept of learners with LD and their normally achieving counterparts was not apparent. Therefore, Chapman (1988) suggests that it is important for one to make distinction between academic and global self-concepts in order to clarify this discrepancy. Furthermore, the acknowledgement that some learners were capable of compensating or diminishing for the effect of lack of success in school with non-academic skills and pursuits was also significant. In addition, the heterogeneity of LD group and the fact that numerous definitions of LD have been used in literature further complicates interpretation and generalisation of results.
In a study conducted by Leondari (1993) comparisons were made between normal and low achieving third to sixth graders in regular classes with those learners who had academic difficulties and attending special education classes. The findings suggested that learners from a special class rated themselves lower in both academic and global self-concept when compared to their normally achieving peers. Based on the findings the researcher assumed that negative self-evaluations in the academic area had an impact to the overall self-evaluations. Similarly in a study conducted by Ntshangase et al (2008) the results indicated that learners with LD had lower self-perceptions in the cognitive and physical domain than their normally achieving peers. Despite the significantly low socio-metric scores of learners with LD, they perceived themselves as well accepted by peers as normal achievers. The results were the confirmations of other findings about domain specificity of lowered self-perception in population with learning difficulties (Gronlik & Ryan, 1990; Vaughn, Haager, Hogan & Kouzukanani, 1992).

2.8 Self-concept, social competence, and peer acceptance

Advocates of inclusive education support the philosophy of that providing education to learners with learning disabilities alongside their normally achieving peers will often increase their overall social functioning and acceptance by peers (Vaughn, Elbaum & Schumm, 1996; Elbaum, 2002).

Theories of self-concept argue that the self develops mainly through interactions with significant others therefore social comparisons with others in a similar environment plays a significant role in the development of the child self-concept. The school environment plays a very significant role in the development of self-concept. The school is one environment where children socialise and interact with their peers.
Hence the school environment is assumed to have pervasive influence on the development of self-concept as children spend most of their day time at school where they are exposed to numerous challenges; therefore it is easy to expect school environment inevitably emphasising social comparison (Hespe, 2006).

Renick and Harter (1989) examined this approach: the influence of social comparison processes on LD student’s scholastic perceptions. In their findings the results indicated that 84% of the participants with LD spontaneously compared their performance with normally achieving peers in the regular room rather than with the equally competent in the resource room. The major finding of Renick and Harter (1989) suggested the influence of social comparison being strong. Learners perceive themselves to be much more academically competent in the resource room than compared with normally achieving peers. The global self-worth showed no significant difference from one frame of reference to another.

Vaughn et al (1992) speculated that, since peer relations form a significant part of social functioning in school age children, they serve as a particularly good indicative prognosis of future social competence. Positive self-concept plays a significant role in increasing social competence (Lemenen, 2002). In numerous studies conducted comparing learners with LD and those without LD, the findings suggested that learners with learning disabilities are to a certain extent liked and accepted by their peers (Vaughn et al, 1996; Rothman & Cosden, 1995). Negative self-perceptions have been associated with developmental, behavioural and clinical problems like depression and learned helplessness (Brown, 1998). Psychosocial problems as well as social skills deficit are characteristics which distinguish many learners with LD from other learners with other types of problems in learning (Lerner, 1993; Prout et al, 1992).
Vaughn et al (1992) conducted a longitudinal study (4-5 years) to examine peer acceptance, self-perception and academic achievement of learners with LD, low achieving, and average/high achieving learners. All learners that took part in their study were assessed prior to and following their identification as learning disabled using both peer rating acceptance scale as well as self-concept scale. No observable differences were identified on the global self-concept measure. Despite lower peer acceptance among learners with LD, they maintained academic and social self-perception on par with better accepted learners. The findings obtained from this study contest the results obtained by Chapman (1988). In her study Chapman concluded that negative school related perceptions in learners with LD develop in the earliest stages of life. Vaughn et al. (1992) assumed that when achievement is contained there were very few apparent differences found on peer acceptance between LD and non LD learners.

Sabornie (1994) examined social effective characteristics (e.g. loneliness, self-concept and integration) and teacher rated social competence in early adolescence across as either learning disabled or non-disabled. The results indicated significant group differences with regard to loneliness and integration. However, there were no significant differences in self-concept between groups despite the teachers continuously rating learning disabled learners, social behaviour lower than that of non-disabled. For learners wit LD integration was positively correlated with learners in school and out of school participation level (clubs, sport, or activities), and negatively correlated with stigmatisation and victimisation. That is learners with less negative view of their learning disability regarded themselves as being more behaviourally competent and more socially accepted.
Observations of learners with learning difficulties were also made in full time inclusive environments. Stanovich, Jordan and Perot (1998) identified the importance in domains of social competence and academic related self-concept that is often ignored in the assessment of learner’s progress was identified. The emphasis was on the centrality of these two domains serving as a source of information in evaluating the effectiveness of educational practises. For the above mentioned purposes, academic self-concept and social integration of four learner groups that were identified as being at risk for school failure, having a disability, using English as a second language and non-categorised were assessed. According to these researchers, the first three groups of those children who participated may be what form the today’s heterogeneous classroom. However, current literature lacks a comparative description across these three groups of learners with reference to the previously mentioned domains.

In one part of the study a socio-metric rating scale was completed. Participants were asked to select peers from their own educational setting. However, this can be a disadvantage to learners with LD as learners with LD rarely get nominated by their peers on such measures. The results were consistent with those of previous studies (Vaughn et al, 1992) indicating a very low correlation between academic self-concept and social integration. Than it can be concluded from the findings that these two domains are quite distinct and incompatible constructs. Comparable scores were obtained for the first three groups as they scored equally lower than the non-categorised group on academic self-concept. Similar pattern was found in social integration scores, with the mean scores of the non-categorised group being significantly higher. Surprisingly, learners with disabilities differed significantly from the other group of learners who were at risk, displaying the lowest social integration
score. At the same time the learning disabled scored higher academic self-concept scores than those learners who were identified as at risk, regardless of similar competence profile within these two groups. Stanovich et al (1998) suggested that these controversial findings were due to the fact that learners with disabilities have their school related difficulties officially identified and labelled. Thus, they already have an action of plan and are perhaps receiving more specific instructions from their teachers. Yet at the same time they might have been stigmatised as different in the eyes of their non-disabled counterparts. In overall, Elbaum (2002) reminded that more attention should be paid to potential social outcomes in making decisions about educational placement.

2.9 Self-Concept, attributions, and achievement

Attribution for success and failure are greatly influenced by children’s perception of their own abilities and achievement in tasks and activities. In general, attribution of one’s success to ability and effort and failure to lack of effort is seen as a positive subsequent for motivation, whereas attributing success to luck and failure to lack of ability has negative implications for motivation (Manning, 2007). According to the attribution’s theory of motivation, great learners believe that their academic success and failures are to a great extent determined by their own efforts and actions (Lerner, 1993). In contrast, many learners with LD tend to believe that achievement at school can be attributed to some unseen external forces that are beyond their control such as random luck or the teacher. For their failures they often blame their lack of ability or the difficulty of the task.

Numerous studies have depicted learners with LD as having lack of confidence in their ability to influence learning outcomes and as displaying poor task orientation
(Eyres, Cooley & Dunn, 1990, Hay, Ashman & Kraayenoord, 1998). Research findings support attribution theory, showing that learners with LD tend to explain their success and failure differently from their peers believing that the control of outcomes rests in the hands of powerful others (Gronlik & Ryan, 1990). This puts learners with LD a very critical condition as they become more vulnerable to academic failure because they believe that there is nothing they can do to improve their academic achievement, and thus feel threatened (Pomerantz & Ruble, 1997).

Chapman (1988) conducted a longitudinal study to examine the link between continuous academic failure and the development of cognitive –motivation. The study was conducted over the period of two years. A comparison was made between normally achieving learners and their non-categorised counterparts who were though identified as learning disabled. Furthermore, the non-categorised group of learners received no remedial support. The results indicated that academic achievement for both groups was to a great extent influenced by academic self-concept (Marsh, 1990). Additionally, perceptions in ability for learners with LD were affected by their grades, however for the non-LD children the case was vice-versa. The results of the study conducted by Chapman (1988) further revealed that learners with LD hold impartially stable but more negative ability perceptions and expectations than the control group. The hypothesis that learners with LD had more external control orientation received relative support. The study confirmed that when learners with LD were compared with their normally achieving peers they appeared to show a distinctive set of affective characteristics. In contrast, Cooley and Eyres reported no group differences in attributions regarding the locus of control but argued that attributions are related to self-concept and not learning disabilities per se. For
example learners with learning negative self-concept are most probable to attribute failures to ability (Schunk, 2004).

Black (1974) already made an establishment that there was a relationship between self-concept and achievement (Schunk, 2004). The results from this study indicated that learners with poor reading ability had significantly low self-concept than learners without any reading problems who were of similar age, sex and intellect (Leminen, 2002). Significant deterioration in self-concept with increase in age was depicted among poor readers. This was indicative of that learning disabilities and self-concept are interconnected in a circular manner. Correspondingly, in a study by Gronlik and Ryan (1990) their findings illustrated that learners with LD perceived themselves as less competent in the cognitive domain than their peers with same IQ even though there were no group differences in general perception of competence. They further suggested that other domains self-concept rather than academic may promote or may function as a source of high levels of self-worth for learners with LD.

Rothman and Cosden (1995) in their exceptional but significant study examined if the meaning children attach to their disability explains their variations in self-concept. The findings indicated that learners who had less attached less negative perceptions to their disability performed better academically and they also displayed a more positive global self-concept and saw themselves as more competent behaviourally and intellectually than those who held more negative perceptions (Gans et al, 2003). This confirmed an assumption that to a certain extent some learners with LD would generalise specific academic weaknesses to more general self-concept and that generalisation is related to how they perceive their disability (Leondari, 1993). Consistently, Ulvinen (1998) found that learners who had difficulties with learning had poor self-concept than those who experienced no difficulties. In addition Prout
and Prout (1996) suggested it was parental expectations and attitudes that may have had great influence on self-concept than the learning difficulty per se.

### 2.10 Self-concept and educational placement

According to the inclusion philosophy all learners are equal irrespective of any disability they might have. The acknowledgement that education is a basic fundamental right supports the notion that all learners have a right to access basic education and they must all be given an equal opportunity with adequate structures and resources for those children with disabilities. This was suggested with a view to improve the quality of education and learning opportunities for learners with learning disabilities as well as their normally achieving peers. This policy further proposes that there not be a range of educational placement but rather all learners be educated in a same physical location regardless of their disability (Knight, 1999).

The advocates of inclusion embrace diversity as a result they perceive the world as an inclusive community with diverse individuals who are not only different in terms of disability but in race, gender and religious background (Engelbretch et al, 1999). Hence, the idea behind the inclusion philosophy is to acknowledge differences rather than erase them and promote an educational community that validates and gives value to their uniqueness (Knight, 1999). In contrary the Federal Law of Individuals with Disabilities Act Amendments of (1997) contends that separate specialised environment may be necessary to educate a child with a disability if adequate special education services and support that will enable the child to progress academically are not provided (Elbaum, 2002). Elbaum further suggested that academic progress is not the only determinant when it comes to making decisions
about an appropriate educational placement but concerns about social outcomes associated with placement options are also put into consideration (Elbaum, 2002).

The placement of learners with learning disabilities in least restrictive educational settings is often associated with positive outcomes. Many researchers who supports the inclusion philosophy are of the opinion that placement of learners with LD in least restrictive settings can lead to increased social acceptance, improved social skills, broader friendship networks and hence positive self-concept for these learners (Manning, 2007; Zyoudi, 2010). However, over the years findings on the subject do not provide unequivocal support for this view (Chapman, 1988).

A study was conducted by Beck, Roblee and Hanson (2002) to determine if there was any significant difference between the self-concept of learners with learning disabilities assigned to regular education classes and special education classes. The main concern was to address whether being placed in special education or regular classroom has any influence on the learner’s self-concept. The data was collected using the Piers-Harris Children Self-Concept Scale. The results indicated no significant difference in the self-concept of learners with LD regardless of placement in a regular or a special class. The limitation of this study was that the length of time spent in special education program was not controlled. Leminen (2002) respectively found no significant differences in the domain of global self-concept between learners with LD and their normally achieving peers. The only differences found were on the domains of behaviour and popularity.

In a study conducted by Gans et al (2003) the findings suggested neither general self-concept nor academic self-concept was to any extent influenced by being placed into special educational class or by the number of years spent in the resource room.
This was an indication that neither categorisation nor labelling had negative consequences on the self-concept of learners with LD. However, in literature considerable debates and mixed outcomes about benefits and drawbacks of placement in special class environment have been found. Special education class placement is often associated with the stigma of labelling and that in turn is assumed to have negative effects on the child’s perception of general competence and other domains unrelated to academic achievement due to generalisation and self-fulfilling prophecy (Leminen, 2002). Leondari (1993) suggested that children who were attending a special class had a tendency to generalise negative self-perceptions in academic domain to the more global evaluation. In contrast, numerous studies have indicated that learners display domain specific self-concept and no such generalisation of self-concept was evident (Bear & Minke, 1996; Westling Allodi, 2000).

In contrast, a number of studies have shown that no such generalisation takes place but learners display domain-specific self-concepts (Bear & Minke, 1996; Westling Allodi, 2000). Additionally, Moberg (1979) showed that teachers play an important role in labelling the learners; they attach unanimously certain affective meanings to these labels and hold stereotyped views of labelled children. The perceptions of learners’ school achievement taken as a variable in teacher’s descriptions also influences the perceptions and evaluations of performance (Moberg, 1979). Similarly Jordan and Stanovich (2001) noted that teachers held different beliefs about the responsibility for learner’s difficulties with learning, and that these attitudes and beliefs were related to their instructional discourse strategies with different kinds of learners. A number of studies have assessed students with LD in various settings of
special education in order to determine whether and what kind of special education placement has an effect on children’s self-concept.

Gans et al (2003) hypothesised that children with LD in partial placement would have higher self-concept due to a multiple reference group than learners with LD but without placement and in turn, this group would obtain higher scores than the learners in maximum special education setting. The results proved the hypotheses correct. Researchers stated that when children with LD isolated into special classes for at least 70 % of the week are compared to those placed in regular classes, measures can obtain differences which are due to placement effects. However, children who were assessed prior and after a year in maximum special class did not display decrease in self-concept scores. In other words, the placement does not have a serious effect. Heyman (1990), on the other hand, found no effect of educational setting on self-concept among 9 to 11 years of age children with LD (Elbaum, 2002).

Beltempo and Achille (1990) proposed that low self-concept may be closely related to the origins of learning disabilities. Since the LD group reported lower self-concept scores at the onset of the academic year, one would expect that low self-concept is closely related to low academic performance which would eventually lead to the identification process and remedial action for learning disabilities per se. They emphasised that all learners with LD had shown low self-concept, regardless of special or regular class placement. Perceived competence among children with LD attending special schools or special classes in regular school, and non-identified low-achievers in regular classes was examined by Butler and Marinov-Glassman (1994). They hoped to shed light on the effects of both placement and grade level (grades 3, 5, and 7) on the self-perceptions.
There are claims that self-perceptions among learners with LD, as among people in general, depend mainly on the targets with whom they compare themselves (Butler and Marinov-Glassman, 1994). It was further argued by these researchers, that in this case, one would indeed expect children with LD who attend self-contained frameworks, where their most important reference group consists of others with disabilities, to feel more positive about themselves than those attending regular classes, and comparing themselves primarily with more competent others (Butler and Marinov-Glassman, 1994). As expected, the results demonstrated that children in special schools perceived themselves more favourably than did those attending special classes in regular schools. Furthermore, perceived competence was high and similar in all groups at grade 3, but decreased by the grade 5 among the special class learners in regular schools and low achieving learners. According to researchers the most striking findings indicated that the effects of educational placement on self-perceptions differed with age in ways consistent with developmental trends of self-appraisal and social comparison. As supported by the very different pattern in self-concepts scores at grade 5, the self-perceptions significantly depend on child’s reference group once social comparison becomes a major source of self-appraisal. These results cast some doubt on arguments (Beltempo & Achille, 1990) that children with LD exposed to both disabled and non-disabled peers, are able to make conscious selective use of multiple reference groups in ways that will protect and boost their self-esteem.

In the summary from several studies of placement effects on self-concept Chapman (1988) concluded that educational framework was not systematically associated with differences in self-concept. Segregated settings did not automatically lead to lower self-concept than mainstream settings. However, unidentified and unplaced learning
disabled (low-achieving) children consistently showed lower self-concept than their counterparts receiving remedial assistance. In a recent study, Westling Allodi (2000) reported that children with LD without support were on a par with learners with support in global self-concept, thus contrasting Chapman’s (1988) conclusions. More specifically Chapman showed that learners with LD in mainstreamed frameworks had relatively lower academic self-concept than those in segregated environments. Similar results were gained by Stangvik (1997), who illustrated special class placement’s positive effect on slow learners’ personal evaluation of his basic abilities, creativity, and cognitive functioning. Moreover, in Westling Allodi’s (2000) study, those receiving remedial support scored lower in academic domain than children without support, but seemed to compensate this threat against self-esteem by placing more importance to peer relations and having more positive image of peer relations at school (Renick & Harter, 1989). The author interpreted results supporting the compensatory model of self-concept (Byrne 1996, 17-18) and confirming domain specific tendencies in self-perception demonstrated in the studies of Leondari (1994) and Montgomery (1994). It’s been suggested that rather than affecting the general self-concept, the effect of the placement may be located to specific dimensions of the self-concept like academic competence, peer acceptance, or ideal self-image (Stangvik, 1976).

Taken together, the research has offered two contrasting views on the effect of educational placement on self-concept: (1) potential negative effects of labelling, grouping, and segregating children; (2) effects of social comparison processes in different settings from special schools to fully integrated framework (Prout & Prout, 1996). Secondary abnormality (learned helplessness; poor self-esteem) is created by the social reaction (labelling; expectancies) to primary deviation (LD; special class
placement) (Moberg, 1979). The later perspective, according to Festinger’s (1954) social comparison theory, argues that people have a drive to evaluate themselves and they use significant others in their environment as frames of reference in forming self-perceptions. Commonly, reference groups are those of which individuals are members, which they admire, or to which people aspire. In Festinger’s opinion we choose the significant others according to how similar they are to us in traits which we personally value high, and how close to our own abilities or opinions they seem (cited in Leminen, 2002).

Elbaum (2002) synthesised 38 empirical studies from this field and found no systematic association between the self-concept and educational placement. The only reliably different placement comparison Elbaum’s meta-analysis revealed was between self-contained classroom in a regular school and placement in a special school, learners displaying more positive self-concepts in the more restrictive environment. Some evidence was gained to cautiously suggest that those receiving special support within regular class may have higher self-concept than those receiving part-time resource room instruction.

2.11 Self-concept and Educational Implications

Self-concept is widely believed to be a fundamental factor underlying individual behaviour. A large body of research has indicated that self-concept is positively associated with academic success (Chapman, 1988; Hartie & Marsh, 1996). The social influence on individual’s self-perceptions indicates that there can be a room for improvement in self-concept/ self-esteem of learners with learning disabilities if appropriate intervention strategies are provided. In educational context such intervention programmes are based on the assumption that there is a reciprocal
relationship between learner success and self-concept, therefore improvement in self-concept will then result in improvement in academic achievement vice versa (Chapman, 1988; Leminen, 2002).

Although research finding on the relationship between self-concept and academic achievement have not proven to be unequivocal, there is general consensus amongst researchers that learners who are failing to thrive academically are likely to have low self-concept. However, the causal relationship between these two constructs is still unclear (i.e. is it negative self-concept which causes poor academic achievement or is it poor academic achievement which causes negative self-concept) (Leminen, 2002). The role played by significant others (parents, teachers and peers) in development of self-concept can be evident if the former case proves to be true. Correspondingly, on a broader context the role of educational institute itself through, for example, the creation of a generalised other which defines the child’s motivation, commitment and attitudes towards education must not be overlooked/ undervalued as it can have negative implications for their self-concept.

On the contrary, if underachievement is the primary source for poor self-concept, then education strategies appropriateness and implementation and criteria for assessment needs to be re-evaluate (Gardner, 1999).

To date, most research done on causality between self-concept and achievement has its basis on research attempting to improve achievement by first improving self-concept (Manning, 2007). Such research work indicates that improvement in a learner’s self-esteem can actually lead to better academic achievement/ interpersonal behaviour. However, Alpay (2000) indicates that whilst the role played by academic success in maintaining or increasing levels of self-concept is considered significant, it is self-concept per se that has excessive influence on
academic self-concept. This correlation between self-concept and academic achievement is most evident in James hypothesis (cited in Alpay, 2000, p.3). According to this hypothesis self-concept=success/ pretentions or self-concept= academic success. That is the higher one’s expectations are, the higher the chances of acquiring success and therefore positive self-concept (Alpay, 2000). However this correlation between self-concept and academic achievement may not necessary be the same for global self-concept or an overall academic self-concept, but it can be domain specific for an example for specific subjects such as reading mathematics and science (Huitt, 1998). This suggests that success in certain area or subject may not necessarily imply alterations in the learner’s global self-concept but perhaps it can lead increased motivation and high expectations (task specific self-concept) for future success. This is closely linked to Biggs and Moore’s (1993) expectancy- value model in motivating learning in children. However, for learners with poor or negative self-concept who may for example be displaying behavioural problems, their overall self-worth may be to a great extent influenced by domain specific improvement on self-concept (Alpay, 2000). The previously mentioned research findings on the reciprocal relationship between academic achievement and self-concept opens a wide variety of solutions that parents and teachers can apply to enhance self-concept of learners with learning disabilities as parents as well as teachers are assumed to have a very significant role in self-concept development. Research done by Carl Rogers (1961) may be significant in clarifying the role played by parents and teachers in self-concept enhancement. Rogers believes that parents and teachers possess specific traits or qualities which can have positive outcomes on the learner’s self-concept. This involves being accepting of the child regardless of his or her disability, being non-judgemental, understanding, genuineness and empathy (Alpay,
Such qualities being possessed by an individual considered as significant by the child are likely to result in a trusting and communicative environment for learning and development. Furthermore, due to the social nature of self-concept group activities with other non-LD learners may prove to be beneficial in enhancing self-concept. Such group activities may lead to positive feedback from peers and thus possible means of re-evaluating a poorly perceived self-image for an example recalling the good times and activities. Specific activities are believed to have great influence on enhancing self-concept as they may provide a learner with an opportunity to take risks an attempt tasks and thus challenge their fears of failure and avoidance or resistance (e.g." playing the hero or expert" activities). Of course age should be taken into consideration due to specific nature of some activities as a result adaptations and alterations should be made to meet specific age criteria.

Lastly, Parents as well as teachers play a very significant role in promoting a positive self-concept enhancing environment for learners with LD at home as well as at school (Alpay, 2000). As mentioned in literature above self-concept development is widely believed to be influenced by significant others (i.e. parents or teachers) as children often look up to them and measure their success and self-worth in comparison to them. For example, if a parent or the teacher is uncertain about his or her own capabilities and they have low levels of esteem children are likely to follow a similar pattern. This may lead to feelings of worthlessness and therefore low self-concept. Therefore, it is important that teachers as well as parents remain positive and encouraging to children who are experiencing learning difficulties for them to succeed and improve their self-concept. Furthermore, indeed the qualities underlying good counselling skills are more likely to be identified with high self-esteem. One implication here is that the education system as a whole has a responsibility in
providing teachers with favourable working environment and opportunities for personal growth, if indeed this is to be favourably reflected in learner achievement (Alpay, 2000).

2.12 Chapter summary

In this chapter literature relevant to the present study was reviewed. That is, literature pertaining to self-concept of learners with learning disabilities in different educational settings. The chapter started with a brief overview of self-concept as a construct, followed by the discussion of the measuring instrument with particular interest to the Piers Harris Children Self-Concept Scale. Research with regards to independent variables such as age, gender was reviewed next and the findings related to these two variables were noted. Lastly, a review of literature surrounding learning disabilities and the effect of different educational settings on the self-concept of learners with LD and educational implications were discussed.
CHAPTER 3
THEORETICAL FRAMEWORK

3. Introduction

It is widely held that self-concept develops as a consequence of one’s interactions within his or her immediate environment as well as the relationships formed with significant others (i.e. parents, educators and peers) (Sternke, 2010). However, due to the complex nature of self-concept as well as its development, not only are the environmental factors important in self-concept construction but one has to consider the biological factors as well (Schultz & Schultz, 2005). Thus it can be said that self-concept development involves both biological and environmental factors. Concrete feedback, causal attributions, opinions of significant others as well as cognitive and physical maturation plays a very significant role in self-concept development (Sternke, 2010).

In this chapter a theoretical framework for the present study will be provided. A number of relevant theories that offer explanation pertaining to the issue of self-concept development are discussed. The chapter begins with the ecological systems theory by Bronfenbrenner’s as it has important implications for understanding development as well as the effect of environmental factors in the development of self-concept. Furthermore, the systems theory views childhood development relating it to various interconnected systems. Lastly, relevant developmental theories that will enable the researcher to explore both biological as well as environmental aspects of self-concept are then examined.
3.1 Ecological Systems Theory

The systems theory is one theory of development that has made a huge impact in childhood development as it places emphasis on environmental factors (Burckhardt, 2007). According to system theory, human behaviour can be best understood if it is viewed in context and in order to understand how and why certain behaviours manifest it is critical to examine both the individual as well as his or her own surroundings. This supports the view that an individual should not be viewed in isolation but his or her own context has to be taken into consideration (Bensch, 2009). This is a view supported by most systems theorists who acknowledge that development in children takes place across a vast array of settings that may influence our behaviour in varying degrees (Berk, 2006).

The inherent characteristics and abilities possessed by a child, immediate family environment that includes economic resources, the emotional atmosphere, number of siblings, space and privacy, the child’s physical environment, including neighbourhood, access to education, political systems as well as culture of the community the child is coming from are what forms part of the settings that influence development (Du Plessis, 2006). As a result, the ecological systems theory views development in children in the context of everyday environment in which the child finds him or herself (Bensch, 2009).

3.1.1 Bronfenbrenner’s ecological systems theory

The ecological systems theory formulated by Urie Bronfenbrenner, a developmental psychologist is one of the well-known theories of development under systems theoretical approach (Burckhardt, 2007). This theory emphasizes the need for human development to be viewed from within the context of everyday environment in
which children develop for the concept of self to be understood. The ecological systems theory suggests that children grow up within complex systems of relationships, influenced by various levels of immediate surroundings that overlap (Bensch, 2009). As children develop not only are their behaviours influenced by their immediate surroundings but they also have influence to their surroundings (Burkhardt, 2007). Such interaction between the child and his or her environment can be assumed to be at least two-way, where the developing child influences and restructures his or her environment and at the same time is also being influenced by the surrounding environment (Bensch, 2009). Bronfenbrenner visualizes the environment as a sequence of layers that encompasses a variety of settings (i.e. home, school and neighbourhoods) but extending beyond to other settings that might also have influence on development (Berk, 2006).

Woolfolk (2007) states that the social context in which development takes place are in constant interaction and have influence on each other. Such interactive ecological environment views development as an arrangement of four concentric systems, the microsystem, mesosystem, exosystem and macrosystem. The microsystem setting is the direct environment, constituting the child’s immediate physical and social environment including people with whom the child interacts with on a regular basis, such as family, friends, classmates, teachers, neighbours and other people who have direct contact with a child (Woolfolk, 2007). This is the most critical stage of self-concept development as self-concept is believed to develop as a result of one’s interaction with his or her immediate environment and the relationship that he or she forms with significant others (Sternke, 2010). The mesosystem involves the relationships between the microsystems in one’s life. That is the child’s experiences in the family context and how it is interrelated to the child’s school experiences.
(Burkhardt, 2007). For example, if the parents are neglecting the child, he may have low chance of developing positive attitude towards his teachers; hence his school work. The exosystem is primary concerned with how the microsystem is linked to other systems which the child rarely has direct contact with, yet has an influential impact on those who interact with the child, and the role that it might have on development (Bensch, 2009).

The macrosystem, which is the final and broadest level of ecological systems theory, includes the actual culture of an individual, including the socio-economic status of the person, ethnicity and political conditions (Scileppi, Teed & Torres, 2000). The societal norms, beliefs, attitudes and ideologies that are promoted in societies are what incorporate this level (Burkhardt, 2007). That includes, cultural beliefs pertaining to child rearing, ethical and moral guidelines of a certain society that determine and dictate which behaviours or actions are believed to be acceptable and the role played by family and school in education. Thus, the ecological systems theory provides a basis within which the development of self-concept can be contextualise and understood.

The development of self-concept is assumed to be at great extent influenced by any of the four systems of the ecological systems approach in isolation, as they interact with one another or with other various systems. The microsystem which is the child’s immediate environment has the most significant influence as the development of self-concept in children with learning disabilities is assumed to be determined by how they are being perceived by significant others (i.e. parents, teachers and peers) (Hodapp, 1998). The most important aspect that affects the child microsystem pertains to whether the child is accepted and viewed in a positive manner by significant others (Quinn, 1998). In addition, being different from others can lead to a
child becoming a potential target for teasing and being rejected by others because of his or her disability hence creating self-concept issues for a child with a learning disability (Bensch, 2009). Furthermore, issues with regard to self-concept can become more prominent as the child leave the family setting and enter the broader society and interact in a mesosystem level for an example going to school. The fear of looking stupid in front of his or her peers can generate more issues with self-concept for a child with LD. As a result of continuous academic failure a child with a learning disability might have fear of being called upon to read something off the board or read aloud in front of the class. Such activities may seem normal and attainable for average school aged child, however it could rather be challenging and damaging for a similar aged child with learning difficulties. Not as a result of lack in cognitive or mental capacity but merely because of fears that his or her limitations will result in him or her failing and making a fool out of him or herself. In the exosystem level, a child is not directly influenced. However, this level can have great influence on the disabled child particularly via media portrayals and stereotypes on disabilities hence, further escalating the anxieties around being different, mocking and rejection that children could experience (Bensch, 2009). The macrosystem level is mostly influence by government policies and legislatures around disability. There is a fair amount of legislations around disability and the right of individuals with disabilities especially in terms of the education of the disabled (Burkhardt, 2007). These legislations and policies implemented can have negative impact on children with LD if they are not up to date and are not implemented in adherence to the general laws of education.
3.2 Theories of Development

3.2.1 Erikson’s theory of Psychosocial Development

Erikson’s theory of psychosocial development has had profound influence on Freud’s Psychoanalysis theory. Erikson (1963) believed that to a great extent personality development is affected by both biological and social factors. That is, although the innate characteristics that we all possess are the determining factors of the developmental stages, “the social and environmental factors to which we are exposed influence the ways in which the genetically predetermined stages of development are realized” (Schultz & Schultz, 2005, p. 223). However, to a great extent this theory emphasizes the social and cultural factors as determinants of personality (Bensch, 2009).

According to Erikson, the developmental process occurs throughout the human life-span. That is from birth to old age. Hence, he divided the growth of personality into eight psychosocial stages (Hjelle & Ziegler, 1992). Each developmental stage accompanied by a particular crisis which needs to be resolved. The resolution of the crisis can either be positive (adaptive) or negative (maladaptive) and until a crisis is resolved a person cannot proceed to the next stage of development (Schultz & Schultz, 2005). For a crisis to be resolved an individual has to attain equilibrium between the two opposing poles (Wait, 2005). Successful resolution to a crisis can lead to maturity and if the conflict at any stage remains unresolved, individuals are less likely to adapt to problems that can rise later in life.

Erikson’s fourth stage of psychosocial development (industry vs. inferiority) beginning from age 6 to adolescence is deemed most eligible for the present study. It is at this stage that children begin school and the school context comprises a large
part of their day (Bensch, 2009). Consequently, the child is exposed to many new experiences and is learning constantly. It is at this stage where a child is expected to acquire fundamental skills of life through formal education and at the same time develop a sense of industry versus that of inferiority (Hjelle & Ziegler, 1992). That is the child’s ability to apply his or her skills and intelligence in pursuing and completing tasks. This brings about high levels of confidence and self-worth in a child. However, if the child is unable to master certain skills or tasks, the child may develop a sense of inferiority or incompetence (Bensch, 2009). This may result in children losing confidence in their ability to function effectively. This is to a large extent influenced by a child’s academic performance abilities. The child’s drive to succeed includes a realization by a child that there is a threat of failure. This underlying fear serves as a motivation for a child to work harder in order to succeed, hence leading to a development of a sense of industry. The most important factor at this stage is for children to realize that they will not succeed at everything they attempt to learn and that individuals are unique and possess different strengths and weaknesses. Eventually, when a child realises this, and successfully achieves a synthesis between industry and inferiority, competence is developed. However one should not forget the role played by other significant individuals in the development of self-concept. To a large extent, the behaviours and attitudes of parents and teachers determine how well children perceive themselves and their ability to use their skills. If children are ridiculed, scolded or rejected, they are likely to develop feelings of inferiority and inadequacy. On the other hand, praise and re-enforcement fosters feelings of competence and encourage continued determination. In addition, constant evaluation of learners at school in different sports or academic performance can also pose some threats for self-concept as achievement can vary for each
individual (Wait, 2005). This can lead to some children being criticized openly and unfairly. Therefore it is vital for children to learn to recognise and accept failure. This can in turn result to the development of good locus of internal control (Bensch, 2009). If the inferiority feelings are not successfully dealt with, the continuous experience of failure can lead to children developing feelings of learned helplessness and adopt a pessimistic view regarding future success.

### 3.2.2 Piaget’s theory of cognitive development

In the field of developmental psychology, the term cognition refers to a group of mental processes, including attention and memory that are responsible for organising, producing, understanding, solving problems as well as making decisions (Bensch, 2009). Theorists of cognitive development place much emphasis on information processing, conceptual resources, perceptual skills, and language learning on the child's development. Piaget’s theory of cognitive development has been acknowledged as a most comprehensive and compelling theory on the development of intellectual capacity and his research on cognitive changes, occurring between childhood and adolescent help support the theory of self-concept development (Kuhne & Wiener, 2000).

Piaget perceives development as “a product of an unfolding genetically driven plane for growth and change “(Loxton, 2005, p.34). Therefore as the cognitive abilities of a child develops and matures his or her capacity for knowledge about his or her own surrounding advances as well (Bensch, 2009). Furthermore, cognitive development theory views children as active explorers who actively construct their cognitive worlds. That is, children are able to adapt efficaciously to their own surroundings by making sense of and interpreting information they come across (Burkhardt, 2007;
Loxton, 2005). This adaptation can take form in two ways namely assimilation (children’s interpretation of new experiences by integrating them to their existing knowledge) and accommodation which is (the alteration of existing knowledge by children in order to accommodate new experiences (Bensch, 2009). The level of cognitive development is what determines the manner in which the process of adaptation takes place. Piaget formulated four distinct stages for understanding development in children depending on their age. These are sensory motor, pre-operational, concrete operational and formal operational stages of cognitive development. They provide an understanding on how an individual’s self-perceptions take a more abstract form as they get older (Woolfolk, 2007). However, the first stage of development which is the sensory-motor stage beginning from birth to 2 years will not be discussed in this study as it is not relevant to the topic at hand.

The second stage of development, namely, preoperational looks at cognitive development of children between 2 -7 years of age. At this stage, the focus is more on how things appear and children are ego-centric. Thus their perceptions of self are more centered on appearance and not how others perceive or view them. Piaget (1972) believed that the process of cognitive development is sequential with each stage having its basis on the preceding one (Bukatko & Daehler, 1998). The emphasis on this stage is placed on achievement of concrete operational thought that is characterised by a gathering of concepts that affords a child with an ability to reason (Berger, 2006). Between the ages 7 and 11 children become less ego-centric and begin to grasp certain logical principles that enable them to apply logic in concrete situations (situations that involves real things that are observable and physical) and in turn increasing their ability and capacity to think. . It is during this stage where children begin school and are exposed to the new environment where
they are expected to form new relationships. This stage and the fourth stage, the formal operational stage beginning from age 11-16 years are assumed to be more applicable to the present study as the school context becomes more critical for self-concept development. During the formal operational stage children learn to explore more logical solutions to solve their problems and they begin to reason abstractly (Loxton, 2005). The most important aspect in this stage is an ability to imagine and reason about hypothetical outcomes (“what if”) and children begin to have an interest in abstract issues such as politics, religion, ethics and other social issues. In addition, they also develop an opinion relating to these issues (Berger, 2006).

Previous research exploring self-concept of children with disabilities, suggests that the broad developmental changes that are prevalent across life-span are significant to the development of self-concept. Thus, the role played by cognitions particularly for learners with learning disabilities seemed to be significant in self-concept development. As children develop and progress academically, they are subjected to many different stressors and opportunities (Sternke, 2010). They begin to care about grades, relationships and their future in general. Thus, self-concept can be greatly affected in part by the way they process feedback about their cognitive performances.

3.2.3 Bandura’s social learning theory

As the systems theory, social learning theory suggests that learning occurs within social context. Albert Bandura (1977), one of the major advocates of social learning, postulates that people learn by observing others perform certain behaviours. The term “reciprocal determinism” was used by Bandura to describe his view of learning (Bensch, 2009). According to this theory as children develop they are in constant
interaction with their physical and social environments. Such interaction is reciprocal in nature, thus behaviour is not only affected by the environment, but the environment itself can be influenced by our behaviour as well (Burkhardt, 2007). This theory is centered on the idea that observational learning takes place through imitation and modelling (Woolfolk, 2007). Imitation involves direct re-enforcement when the child copies the behaviour of others, while modelling requires the child to learn the behaviours or personality traits of a parent or other role model through indirect re-enforcement. The child’s level of cognitive development plays a role in his or her ability to observe, learn, recite from memory and later imitate the behaviour observed from his or her role model (Burckhardt, 2007). Modelling also has a significant role to play in self-concept development, where children may observe and learn behaviours from significant others and model their behaviours as well (Burnett, 2008). Furthermore, in the context of this theory, poor self-concept in children with learning disability can be perceived as a learned response, resulting from the fact that, as children interact with their surrounding and environments they are exposed to negative situations and stimuli that could perhaps provoke feelings of worthlessness. On the other hand poor self-concept may also develop as a result of direct experience of an uncomfortable situation (peer rejection, being ridiculed and academic failure). Thus it can be said that poor self-concept according to social learning theory can occur in three ways. Firstly by modelling certain behaviours from others, secondly via being exposed to negative situation or stimuli and lastly by a direct provoking situations (Burnett, 2008). In terms of these three possibilities, it can be noted the latter two are more likely to have a significant influence on self-concept development in children with learning disabilities.
3.3 Chapter Summary

The theoretical framework for the present study was provided in this chapter. Numerous theories pertaining to self-concept development were discussed. The chapter began with Bronfenbrenner’s ecological systems theory as it provides the framework for the development of self-concept looking at environmental aspects. Lastly, an overview of relevant developmental theories including Erickson’s psychosocial development, Piaget’s cognitive developmental theory and Albert Bandura’s social learning theory were then discussed.
CHAPTER 4

RESEARCH METHODOLOGY

This chapter provides an outline of methods used in obtaining and analysing data rendered by the present study.

4.1 Introduction

The present study is descriptive and explorative in nature as there is still a huge amount of knowledge lacking with regards to the issue of educational placement and its effects on the self-concept of learners with Learning Disabilities (Smith, 2007). A number of studies addressing the issue of self-concept amongst learners with learning disabilities have been conducted, however very few of those studies have compared the self-concept of learners with LD in different educational settings, particularly within the South African context. Most studies conducted compared the self-concept of learners with LD in a regular classroom with that of their non-disabled peers.

To reiterate and for clarification purpose the present study was aimed at exploring the experiences of learners with learning disabilities in different educational settings and the effect this might have on various aspects of their self-concept.

The primary aim of this study was to investigate and determine if there are any significant differences between the self-concept of learners with learning disabilities in mainstream schools compared to their learning disabled counterparts in special school environment.
The secondary aim for the present study was to examine how self-concept issues manifest in children with learning disabilities when various characteristics of the participants, namely gender, age, ethnicity and grade are taken into consideration.

4.2 Research design

The present study was descriptive in nature, hence a differential research design was deemed appropriate for use. Differential research design is used to “describe systematically the facts and characteristics of a given population or area of interest factually or accurately” (Isaac & Michael, 1977, p. 18). Furthermore, this design is most suitable for use in research studies that compare two or more groups that are differentiated on a basis of a pre-existing participant variable (Bensch, 2009, p. 45).

Differential research design is most effective for use in conditions where the manipulation of an independent variable is not feasible or is impractical (Bensch, 2009, p.45). In the present study the manipulation of the main classified variable (Learning Disability) was impractical, hence the use of differential research design was assumed to be most adequate . In differential research design participants assigned automatically based on their pre-existing characteristics (Graziano & Raulin, 2007). Educational setting was used to distinguish the two groups in this study as the educational setting for learners with LD is determined by the severity of the disorder. Learners who took part in this study were assigned to groups based the type of educational setting they are placed in (Special schools or regular schools).

4.3 Exclusion Criteria
Learners who took part in the present study had to be classified as learning disabled and be of average to above average intellectual capacity. According to the Diagnostic Manual of Mental Disorders, “Learning Disabilities are diagnosed when the individual’s achievement on individually administered, standardized tests in reading, mathematics, or written expression is substantially below that expected for age, schooling, and level of intelligence. The learning problems significantly interfere with academic achievement or activities of daily living that require reading, mathematical, or writing skills” (APA, 2000, p.49). Furthermore, the learning problems had to significantly interfere with academic achievement or activities of daily living that require reading, mathematical and writing skills. It was also of great importance that the participants had insight into their disability as the PHCSCS-II is a self-report survey and the learners had to understand the questions and report on their feelings. Lastly, with the exception of a learning disability, there had to be no other physical disability present to the participants, as a possibility existed that this could confound results.

4.4 Participants

One hundred twenty six learners classified as learning disabled formed part of the final sample. This included 74 children from special schools (31 males and 43 females) and 52 from regular education classes (33 males and 19 females). Data was collected from 6 different schools around Amajuba and Empangeni District. The original sample consisted of 139 participants, but surveys that were incomplete with more than five items left blank (n=9) on the PHCSCS-II, as well as surveys completed by children falling outside of the pre-requisite criteria (n=4) did not form part of the study. Furthermore, children in both groups presented a variety of
learning difficulties, reading, writing, mathematics, and learning disorders not otherwise specified. Table 1 also depicts the demographic characteristics of the primary group.

**Table 1: depicts the demographic characteristics of the total sample as well as a Regular and Special Education groups**

<table>
<thead>
<tr>
<th></th>
<th>Total Sample</th>
<th>Regular Education</th>
<th>Special Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>N%</td>
<td>126 (100)</td>
<td>52 (41)</td>
<td>74 (59)</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Girls</td>
<td>62 (49.2)</td>
<td>43 (34.1)</td>
<td>19 (15)</td>
</tr>
<tr>
<td>Boys</td>
<td>64 (50.1)</td>
<td>31 (24.6)</td>
<td>33 (26.1)</td>
</tr>
<tr>
<td>Grade:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>8 (6.3)</td>
<td>3 (2.3)</td>
<td>5 (4)</td>
</tr>
<tr>
<td>3</td>
<td>11 (8.7)</td>
<td>7 (5.5)</td>
<td>4 (3.1)</td>
</tr>
<tr>
<td>4</td>
<td>15 (11.9)</td>
<td>5 (3.9)</td>
<td>10 (7.9)</td>
</tr>
<tr>
<td>5</td>
<td>28 (22.2)</td>
<td>10 (7.9)</td>
<td>18 (1.4)</td>
</tr>
<tr>
<td>6</td>
<td>33 (26.1)</td>
<td>12 (9.5)</td>
<td>21 (16.6)</td>
</tr>
<tr>
<td>7-10</td>
<td>31 (24.6)</td>
<td>14 (11.1)</td>
<td>17 (13.4)</td>
</tr>
<tr>
<td>Ages:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7-9</td>
<td>15 (11.9)</td>
<td>7 (5.5)</td>
<td>8 (6.3)</td>
</tr>
<tr>
<td>10</td>
<td>21 (16.6)</td>
<td>5 (3.9)</td>
<td>16 (12.6)</td>
</tr>
<tr>
<td>11</td>
<td>36 (28.5)</td>
<td>17 (13.4)</td>
<td>19 (15)</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>Regular</td>
<td>Special</td>
</tr>
<tr>
<td>------------------</td>
<td>-------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td><strong>Sample</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Age groups:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7-11 years</td>
<td>72 (57.1)</td>
<td>29 (23)</td>
<td>43 (34.1)</td>
</tr>
<tr>
<td>12-18 years</td>
<td>54 (42.8)</td>
<td>23 (18.2)</td>
<td>31 (24.6)</td>
</tr>
<tr>
<td><strong>Race/culture:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>79 (62.6)</td>
<td>35 (27.7)</td>
<td>46 (36.5)</td>
</tr>
<tr>
<td>Coloured</td>
<td>12 (9.5)</td>
<td>4 (3.1)</td>
<td>8 (6.3)</td>
</tr>
<tr>
<td>Indian</td>
<td>18 (14.2)</td>
<td>6 (4.7)</td>
<td>12 (9.5)</td>
</tr>
<tr>
<td>White</td>
<td>17 (13.4)</td>
<td>7 (5.5)</td>
<td>10 (7.9)</td>
</tr>
<tr>
<td><strong>Language instruction:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>English</td>
<td>47 (37.3)</td>
<td>27 (21.4)</td>
<td>20 (15.8)</td>
</tr>
<tr>
<td>IsiZulu</td>
<td>79 (62.2)</td>
<td>25 (19.8)</td>
<td>54 (42.8)</td>
</tr>
</tbody>
</table>

Children with Learning Disabilities constituting the special class group attended two special schools from Newcastle, Kwazulu Natal and a remedial school from Empangeni. Girls (n=19) and boys (n=33) attended grades 2 (n=3) 3 (n=7) 4 (n=5) 5
(n=10) 6 (n=12) 7-10 (n=14) and fell between ages 7-18 years with the mean age of 13. Children constituting the regular education group attended four mainstream schools from Amajuba district an Empangeni district with two schools with remedial classes. Girls (n=43) and boys (n=31) attended grades 2 (n=5) 3 (n=4) 4 (n=10) 5 (n=18) 6 (n=21) 7-10 (n=17) and fell between ages 7-18 years with the mean age of 13. Children in both groups presented with a variety of learning disorders with varying degrees of severity.

4.5 Measuring Instruments

The measuring instrument used in the present study is described for further clarification. Two languages namely, English and IsiZulu were used to administer the survey to the participants. These are the languages that children who took part in this study received their formal education instructions.

4.5.1 Piers Harris Children Self-concept Scale

The Piers-Harris Children’s Self- Concept Scale was used to measure self-concept in the present study. The Piers Harris Children Self-concept Scale-2 is a 60 item self-report questionnaire used to assess learner’s conscious self-perceptions and self-attitudes, subtitled “THE WAY I FEEL ABOUT MYSELF” (Piers & Herzberg, 2005). Answers appear in a dichotomous “Yes” or “No” form, allowing the scale to be easily understood by participants. The PHCSCS-II is appropriate for use in any research, educational or clinical setting that requires an efficient quantitative analysis of children’s reported self-concept (Piers & Herzberg, 2005) “The PHCSCS’s usefulness and adequacy as a research instrument has been widely documented” (Gans et al, 2003, p.289) and “overall the PHCSCS-II has received substantial
clinical use and has been recommended over the measures of self-concept” (Gans et al, 2003, p.291).

The PHCSCS-2 is appropriate for use with children aged 7 to 18, with at least grade 2 reading level (Piers & Herzberg, 2005). As some of the children in this study had difficulty with reading, the questions were read aloud to them by the assessor.

The PHCSCS-2 provides individual information on six domain scales

- Behaviour adjustment (BEH)
- Intellectual and School Status (INT)
- Physical appearance and attributes (PHY)
- Freedom from anxiety (FRE)
- Popularity (POP)
- Happiness and Satisfaction (HAP)

Leminen (2000) gave an analysis of the six cluster scales which reflect different aspects of self-concept. According to Leminen (1) Behaviour suggests the extent to which the child acknowledges and admits or denies problematic behaviours; (2) Intellectual and School Status indicates the child’s self-perceptions of his or her abilities with respect to academic tasks; (3) Physical Appearance and Attributes reflect the child’s self-image in terms of physical characteristics and leadership attributes; (4) Anxiety reflects general emotional disturbance and moods; (5) Popularity demonstrates child’s own assessment of his or her popularity with classmates; (6) Happiness and Satisfaction taps a general feeling of being a happy person who feels satisfied with one’s own life.
The raw scores obtained for each of the PHCSCS-II are converted to a normalized T-Score (with a mean of 50 and a standard deviation of 10). A high T score is considered to be above 50 and a low T score is considered to be below 39 (Piers & Herzberg, 2005). The PHCSCS-II was standardized on the sample of 1387 United States boy and girls in the age group of 7-18 across an ethnic group distribution that is similar to U.S census figures. Piers and Herzberg (2005) suggest that “this means that norm referenced standard scores can be used with children and adolescents from diverse backgrounds “(P.20), however this still has limited generalisability to South African children.

Although Piers and Herzberg (2005) consider this a useful instrument, they do suggest that “it cannot by itself provide a comprehensive evaluation of a child’s self-concept” (p.4). Furthermore, the validity of cluster scales has been subjected to considerable argument (Byrne, 1996; Chapman, 1988). Piers (1984, 38) herself stressed that these scales may only suggest areas of relative strength and vulnerability in individual children, and cluster scores should always be interpreted with caution and never independently. Thus it is recommended that the information provided by the PHCSCS-II is incorporated with other sources of data.

When scoring the PHCSCS-II it is important to take into account some validity issues. Piers and Herzberg (2005) suggest that four kinds of validity issues need to be considered.

- The child may try to distort her answers, where positive exaggeration (faking good) and negative exaggeration (faking bad) could take place.
- The child may have a tendency towards a negative and positive response bias.
- The PHCSC-II has a response (RES) bias index which can be used to assess yes or no saying biases.
- The child may randomly respond to the questions and this would be assessed using the inconsistent responding (INC) index.
- A moderator variable could cause systematic group differences.

The PHCSCS-II has been analysed for the effects of several potential moderator variables (namely age, sex, ethnicity, socio-economic status and geographic region), however the moderator variables may still play a role.

As an instrument for this study, the PHCSCS-II was selected for several reasons. It was standardized on a broad age range (grades 4 through 12, 8-18-year-old) and large samples. It has been widely used with different populations and in a number of settings (Elbaum & Vaughn, 2001; Piers & Herzberg, 2005). The manual provides examples of studies with mentally retarded, gifted and children and adolescents with LD (2005). Despite the fact, as Piers (1984) pointed out, it is important to develop national and local norms for interpretation. Moreover, the theoretical background is reported in the manual, including a phenomenological view of self-concept where self-report serves as the best suiting measurement device (Piers & Herzberg, 2005). Finally, the Piers-Harris was chosen because it provides an effective measure of overall self-concept, which is the main target of interest in the present study.

4.6 Research Procedure

4.6.1 Stage 1 – permission

The Kwazulu Natal Department of Education (KZNDOE) was approached with the request to grant permission to conduct the present study. Once permission was
granted by the KZNDOE, further planning for this research commenced. Schools identified as suitable for the present study were then visited. Contact was made with the principals and governing bodies to provide them with relevant information pertaining to this research and to obtain their permission to conduct this research on school premises as well as to identify learners who were suitable for use in the present study. Consent was sought from the parents of all learners who took part in this study.

Amongst the schools visited, two schools were special schools, specifically providing for learners with learning difficulties and the rest were regular schools with two of them offering special or remedial support. These schools were located in different geographical areas. Full support and commitment was provided by all the visited schools. Convenience sampling method was used as a means to select the sample for the present study and all assenting children were included in the present study.

4.6.2 Data collection

Data collected was mainly quantitative in nature and was not manipulated in any way. The survey namely, Piers Harris Children Self Concept Scale (PHCSCS-II) was completed by the participants. Data collection took place from May –June 2012 and the administration of the survey was done in an environment that was familiar, safe and comfortable to the participants. Since some of the participants had problems reading and writing the survey was administered individually and orally. The researcher read each item to the participant and noted his or her response.

For all the participants the researcher first read the instructions, children were then requested to answer on the answer spaces provided. In all cases of administration, concerted efforts were made to ensure that children who had reading difficulties
understood the instructions and that, they were fully aware of the response alternatives available to them. Assessments took approximately 45 minutes and participants were assured that there were no right or wrong answers.

At all six schools visited data collection began with a motivational talk, where children were educated about the importance of the study in order to motivate them to take part in the study. The significance of their input to the present study was then explained as well as how they would be able to help the education system in South Africa design and implement effective strategies aimed at developing and improving their education. Lastly, issues pertaining to confidentiality and anonymity were then explained in a child-friendly manner.

5.6.3 Stage 3 – data analysis

A quantitative method by means of the PHCSCS-II was used to collect data for the present study. The data obtained was used to assess six different aspects of self-concept namely behaviour, intellectual and school status, physical appearance and attributes, anxiety, popularity and happiness). Furthermore, the first page of PHCSCS-II was used to collect information pertaining to the independent variables used to determine differences between the two groups (special and regular education) with reference to age, gender and culture. The process of analysing data for the present study was carried out using the computer analysis program; namely, Statistical Package for the Social Sciences (SPSS). To start with, the data was recorded in a way that all items were marked in the direction of positive self-concept. The manual gave instructions how to do it. The total self-concept score (also global, general, or overall) and the six cluster scores were then calculated for each child.
4.7 Ethics

The protection of human rights and dignity with regard to research is one of the foremost obligations and prerequisite of the Health Profession Council when conducting research. As a result, one of the first principles of any research involving children is that of non-harmful procedures both physically and psychologically. To uphold to such standards the researcher will not impose any harmful methods in obtaining data for the present study. The well-being and interest of all participants will be given high interest.

In keeping with the code of ethics and to avoid lawsuits, all participants will sign a consent form as an indication that they agree to take part in the study and that they understand all the terms underwritten in the contract. Furthermore, due to the sensitive nature of the study to be undertaken the researcher will ensure that great care is taken for all the participants throughout the data collection process.

Participation was voluntary and if the participant wish to withdraw from participating at any time in the study, they had autonomy to do so. This was to ensure that participation is free and voluntary and that no harm is inflicted that might cause neither psychological nor physical harm on the participants. The Child Guidance Centre at University of Zululand as well as the psychologist on site was utilised for counselling services if for any reason the participants experience discomfort or distress during the course of data collection. Anonymity was maintained throughout the course of this study. Lastly, data collected will be kept in a safe place where only authorised personnel will have access.

In the special schools visited, school psychologists were present at all times to facilitate and monitor the process of data collection. Due to the fact that the issue of
self-concept might have been psychologically disturbing for some children, participants were closely monitored to depict any signs of discomfort or distress. Thus, if any signs of discomfort or psychological distress were picked up, participants would have been referred to University of Zululand Child Guidance Centre for counselling or be attended to by the psychologist on site. Throughout the process of data collection, two senior Educational Psychologists were present at all times for consultation and supervision.

4.8 Chapter Summary

This chapter provided an outline of the methodology used with regard to data collection and analysis for the present study. The discussion commenced with a brief introduction and thereafter the research design to be applied in the present study. Demographic information pertaining to participant characteristics was then provided (see table 1). This was followed by a discussion of measurement instruments to be used, starting with a biographical questionnaire and followed by the PHCSCS-II. Furthermore, an in depth discussion on research procedure and data analysis was also provided. Lastly, ethical considerations pertaining to the present study were then discussed.
CHAPTER FIVE

RESULTS

This chapter provides more detailed information with regard to the demographics of the sample in the present study. The study’s main findings are presented as they pertain to the six cluster scales on the Piers Harris Children Self-concept Scale (PHCSCS-II) that measures different aspects of self-concept. These six different aspects are examined in terms of three independent variables, namely, gender, age and ethnicity, with each independent variable being discussed in relation to the effect it might have on the dependent variable.

5.1 Demographic Data

Demographic data pertaining to the final sample is provided below with the purpose of contextualising the sample in the present study and provide a framework from which the results of this study are interpreted.

One hundred and twenty six participants, namely, 74 (59%) learners with learning disabilities from regular education classroom and 52 (41%) learners from special education classroom took part in the present study. This constituted boys (n=64, 50.1%) and girls (n=62, 49.1%) with a mean age of 13, range 8-18 years. The majority of the participants were black (n=79; 62, 6), followed by Indian (n= 18; 14, 2), white (n= 17; 13, 4) and coloured (n=12; 9, 5) participants. The results for the present study are reported as they pertain to the two groups (special class group and regular class group) respectively. The demographic characteristics of the participants who took part in the present study are presented in the graphs below.
The demographic of the 126 participants according to their educational placement (Regular and Special Education classes) is demonstrated in figure 5.1.1

Figure 5.1.2 depicts the age distribution of the 126 participants
Figure 5.1.2 Age distribution

Figure 5.1.3 depicts the gender distribution of the 126 participants

Figure 5.1.3 Gender distribution

Figure 5.1.4 depicts the cultural distribution of 126 participants
5.2 Results

5.2.1 Self-concept of learners with LD in regular and special classroom

Data analysis for the present study indicated that there was a difference in terms of global self-concept of learners attending special schools compared to those in regular schools. Learners from the special education group in the present study presented with higher global self-concept scores (mean = 59, 60; SD= 11.87) when compared to their counterparts in regular education classroom (mean= 56, 27; SD= 11, 17). These results are contrary to most studies conducted comparing self-concept of learners with and without LD. However, the discrepancy between the scores was not that significant. Learners with learning disabilities in a special class group obtained constantly but non-significantly high scores on five out six subscales.
when compared to the other group of learners with LD in a regular school setting. The non-significant higher score for regular class learners was observed only in the "Behaviour" sub-scale. Table 1 depicts the standard deviation the standard deviation and means as well as the t scores for both groups presented in this study.

**Table 1 provides the means, standard deviations and t-scores on PHCSCS-2 scores for the total sample**

<table>
<thead>
<tr>
<th>Scale</th>
<th>Special School</th>
<th>Regular School</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>mean</td>
</tr>
<tr>
<td>Total</td>
<td>72</td>
<td>59.60</td>
</tr>
<tr>
<td>Behaviour</td>
<td>79</td>
<td>13.10</td>
</tr>
<tr>
<td>Intellectual and School</td>
<td>79</td>
<td>12.22</td>
</tr>
<tr>
<td>Physical Appearance</td>
<td>78</td>
<td>7.56</td>
</tr>
<tr>
<td>and attributes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxiety</td>
<td>79</td>
<td>11.61</td>
</tr>
<tr>
<td>Popularity</td>
<td>79</td>
<td>9.10</td>
</tr>
<tr>
<td>Happiness and Satisfaction</td>
<td>78</td>
<td>8.21</td>
</tr>
</tbody>
</table>

The present study further compared learners with learning disabilities receiving their education in a regular school with a special or remedial class (LDRS) and those receiving their educational instructions in a special school (LDSS). Caution was taken in interpreting the result for reliability concerns as there was a discrepancy on the number of learners from the two groups, with the LDSS group having a higher number of participants. The outcome for this comparison suggested that there were no differences between the two groups. Furthermore, when learners from the regular
education with a remedial class were compared to their counterparts receiving their education in a similar environment but without any remedial assistance, the LDRS group received significantly more positive score on “Anxiety” and cluster than regular class learners (t (118)=-2.38, p < 0.5). The results also depicted that on all scale the LDSS, group had higher but non-significant scoring pattern in comparison to the LDRS group. Furthermore negative perceptions were also apparent amongst learners with LD in a regular school without any remedial assistance when compared to their counterparts in a regular school with remedial support.

5.3 Gender difference relating to self-concept

In the comparisons made between boys and girls the results indicated there was no significant difference on the global scale for both groups. These results are contrary to previous research conducted on the topic as girls in the present study scored more positive than boys on the total scale. The “Physical Appearance and Attributes was the only cluster that yielded a significant difference favouring girls. However there were no differences found between boys and girls from special education classes. Table 2 below depicts the means and standard deviations for both groups.
Table 2 provides Means and Standard Deviations of total scores for boys and girls in Regular and Special Education

<table>
<thead>
<tr>
<th>Gender</th>
<th>n</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regular Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys</td>
<td>31</td>
<td>59.71</td>
<td>13.11</td>
</tr>
<tr>
<td>Girls</td>
<td>43</td>
<td>59.29</td>
<td>10.46</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Special Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys</td>
<td>33</td>
<td>54.17</td>
<td>11.67</td>
</tr>
<tr>
<td>Girls</td>
<td>19</td>
<td>60.12</td>
<td>11.8</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Sample</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys</td>
<td>64</td>
<td>57.23</td>
<td>12.67</td>
</tr>
<tr>
<td>Girls</td>
<td>62</td>
<td>59.60</td>
<td>10.68</td>
</tr>
</tbody>
</table>

5.4 Age Difference and Self-concept

A comparison on self-concept and age difference between learners with LD in different educational settings was made with an attempt to examine if learners from lower grades (younger children) held more positive self-concepts than those in higher grades (older children). The findings indicated that there was significant age difference on the overall self-concept between younger and older children. This supports the notion that self-concept changes in ordinary development of the individual in response to environmental and developmental changes (e.g. change in physical structure, cognitive abilities as well as many other areas, including
academic skills, communication and language skills, and social skills). The self-perceptions or self-concept of younger children was more positive when compared to older children with LD in higher grades. Older children scored significantly low particularly on the “Intellectual and School” and “Happiness and Satisfaction” as well as “Popularity” subscales however their scores were significantly more positive in the domain of athletic competence. Such differences in self-concept were assumed to be caused by the fact that self-concept in middle-childhood and upwards take a more socio-evaluative dimension that includes relating to social, personal and family relationships, fear of failure and worthlessness. Thus, self-concept issues are likely to emerge.

5.5 Self-concept and Culture

Comparisons amongst learners with LD with respect to their cultures were also made in the present study. The results reflected that there were differences in the overall self-concept of learners with LD for both groups. However, such differences were not that significant. Black learners with LD obtained high scores in the cluster of “Popularity” and “Physical Appearance” when compared to the other groups. This may be an indication that black children had no problems with being accepted by their peers and in forming meaningful social relationships with their peers despite their difficulties with learning. However, all groups scored significantly low scores on the “Behaviour” subscale as well as “Intellectual and School” subscale.

5.6 Reliability analysis of the PHCSCS-2

According to Piers & Herzberg (2005) the test-retest reliability (stability coefficients) of the total scale of the Piers-Harris ranges from .42 to .96. It is suggested that the lower long interval test-retest reliability is due to the changing nature of self-concept
over time though it is a stable construct (Piers & bHerzberg, 2005). The median test-retest reliability was .73. Internal consistency of the total scale of the instrument ranges from .88 to .93 (.77 mean for subscale coefficient) and the validity is at acceptable levels. Keith and Bracken (1996) stated that several factor analyses have provided reasonable evidence of construct validity, but still call for caution when interpreting cluster scales. Intellectual / School Status cluster has been reported $r = .78$ correlation with the total scale (Piers, 1984). In the manual Piers (2005) reported results from the normative sample consisted of 1183 school children from 9 different grade levels. For the total score, mean was 51.84 and SD = 13.87. Internal consistency reliability levels >.90 and >.80 are considered adequate for total scores and subscales, respectively (Keith & Bracken, 1996).

In the present study the Cronbach’s Alpha for the total scale ranged from .90 to .92. In terms of the subscales the alpha ranged from .69 to .82. The adequate level of reliability was only reached by the “Behaviour “and “Physical Appearance and Attributes” clusters. Thus, reliability is assumed sufficient for the total scale, but it is significant that subscales be interpreted with caution. “Intellectual / School Status” ($r = .83$) and Happiness and Satisfaction” ($r = .84$) clusters correlated with the total score at $p = .01$ level.

### 5.7 Chapter Summary

This chapter began with a short outline of the demographics of the participants in the present study. The six different aspects of self-concept on the PHCSCS-II were examined in terms of four independent variables, namely, gender, age, ethnicity, and educational setting. Lastly, the reliability analysis of the PHCSCS-II is discussed. In chapter 6 the results presented in this chapter will be discussed further.
CHAPTER SIX

DISCUSSION OF THE FINDINGS, LIMITATIONS, RECOMMENDATIONS AND CONCLUSION

The previous chapter dealt with the presentation and discussion of the main findings of the study. In this chapter certain conclusions will be drawn from these findings, including a summary of significant points. As with chapter five, the discussions will mainly focus on the self-concept in relation to the three independent variables of the participants, namely age/grade, gender as well as culture. The chapter concludes with the summary of the most important findings as well as the limitations and recommendations for future research pertaining to the present study.

6.1 Discussion of the findings

The present study was motivated by the need to explore the self-concept of learners with learning disabilities in different educational settings so as to gain a broader insight to their experiences in such placement options. The following aims are what guided research in the present study.

**Primary aim:** To determine if there is any difference in self-concept between regular class and special class learners.

**Secondary aim:** To investigate and determine if there is any relationship between different educational settings and the self-concept of learners with learning disabilities.

**Lastly:** To determine if the following characteristics of the participants, namely gender, age, ethnicity and grade are interrelated to self-concept.
6.1.1 Findings as related to overall group differences in self-concept

Learners with learning disabilities in special education classes were compared with learners with learning disabilities receiving their educational instruction in a regular classroom setting. The findings for the present study indicated that learners attending special education classes did not differ from regular class learners with respect to general self-concept. This is contrary to most studies on self-concept comparing learners with LD and without LD; in the present study the special education group reported higher global self-concept scores. This supports the first hypothesis that learners with LD in different educational settings differ in their self-concepts.

There are numerous possible explanations for inconsistency in the findings of the present study in relation to documented research. The first one concerns the quality and sensitivity of the measurement tool used. According to Chapman (1988) if the difference between groups occurs particularly in the academic domain rather than in general self-concept, instruments having a valid academic scale are more likely to reveal discrepancies. Most studies conducted using the Pier Harris tends to be confusing, since some of them suggest differences and others do not (Cooley & Eyres, 1988). Results from the present study reflect that the special class learners exhibit similar self-concepts than the regular class learners in the “Intellectual and School Status” Scale (academic domain) as well as in all other subscales of the Piers-Harris. Hence, the PHCSCS-II is viewed as a more general measure of self-concept.
Leondari (1993) on the basis of her own results argued that the reason behind poor self-concept on learners with LD lies in negative self-perceptions in the academic sphere which generalises to the overall self-evaluations. According to her, school is one of the few contexts where children are under constant evaluation and receive feedback on a daily basis about their performance and behaviour. Since all seven counted cluster scores on the self-concept scale for the special class group were consistent and high, it can be interpreted to indicate generalisation of one positive domain (academic domain in this case) over all other domains and finally adding up to a positive global self-concept.

Thirdly, geographically and culturally most research on the topic was done in the English-speaking countries such as Europe, where inclusion or mainstreaming is the most common educational practice than in South Africa. Therefore, the present study is not directly comparable which may for some parts explain the controversies between findings.

Chapman (1988) in her review summarised that learners with LD in mainstreamed schools, had relatively lower academic self-concepts than those in special classes. As one of its major interests this study was aimed at examining the impact of different placement options on learner’s self-concept. None out of the three educational placements (regular schools, regular schools with remedial or special class, and special school) proves significantly better or worse than the others when learner’s self-concept scores were compared.

In a recent meta-analysis conducted by Elbaum (2002) the effects of different educational settings on self-concept was examined. In four out of five placement comparisons: regular class vs. resource room, regular class vs. self-contained class,
resource room vs. self-contained class, and regular class vs. special school, no significant differences were found. In her findings Elbaum emphasized that the only significant difference found was in the special school where learners reported remarkably higher self-concept than those learners in self-contained classrooms in regular schools. Her findings are almost similar to the results obtained in the present study, where results indicate that learners with LD in special schools exhibit more positive self-concepts than any other participating group even though the discrepancy was not that significant. LDSS learners obtained higher scores on every part of the Piers Harris Children Self-Concept Scale. These results clearly demonstrate that special class educational settings do not directly lead to a lowered self-concept for learners with LD.

Lastly, Stangvik (1979, p. 134) mentioned that the main characteristic of all learners classified as learning disabled is that they have all been defined as failures in regular classrooms and they all share the social definition of this failure by being placed in a special class. Assuming that a learner from a special class is exposed to a far lesser amount of labelling than a child in a regular class with learning difficulties, the labelling paradigm seems to be a valid tool in the analysis of differences between educational settings (Stangvik, 1979, p. 145).

Findings from the present study indicate that the average global self-concept score for the special class group is slightly higher than the average of the regular class learners. It can therefore be assumed that neither the identification of learning difficulties nor the transfer to special education class or school negatively affects the overall self-concept. This supports Elbaum’s (2002) results which showed that contrary to predictions based on the stigmatisation perspective, learners with LD placed full-time in regular classrooms did not on overall exhibit higher self-concept
than learners placed in either part-time or full-time special education classroom. However, the present study did not control the number of academic years children with LD had attended special education programs, nor the point in their schooling history when they had been identified and referred to special class.

The tendency to keep learners with learning difficulties in regular classes or in other special educational services before recommending them for special class may result in great age differences in special classes, and the supposed homogeneity of the special class group on general intelligence tests may conceal differences in abilities and skills which may be extremely relevant as components of self-perceptions (Stangvik, 1979, p. 126). However, both timing of transfer and years spent in special class are important variables in experiencing labels and thus in the development of self-concept. Differential reactions to placement may spring from differences in amount of experienced failure and in attitudes towards special class placement. What kind of meanings early identification and intervention bear upon the level of adjustment and acceptance of one’s own limitations and special traits.

A number of studies have demonstrated that achievement and self-concept are somehow related to one another (Chapman, 1988). The relationship between self-concept and achievement has prompted a considerable amount of debate and research (Ayres et al, 1990). The present study did not measure academic achievement per se, but judging from relatively high average “intellectual and school” status scores it appears that children have confidence in their intellectual and academic abilities irrespective that some of them have had school related problems officially identified as learning disabilities. Hence, achievement rates tend to correlate higher with academic self-concept than with general self-concept (Leminen 2002).
Research has revealed that there are concerns that learning disabilities and special education placement may affect children’s social self-concept and peer acceptance (Stanovich, Jordan & Perot, 1998). The present study provides no evidence that those learners from special education would feel less popular or accepted among their own group than regular class learners. Learners from a special education group exhibit more positive scores on “Anxiety” scale, thus no feeling of being left out of things and worrying less than regular education learners, learners from special schools self-report being significantly happier in general and easier to get along with than the comparison group. These results are contrary to the findings by Sabornie (1994) who believed that learners with LD were lonelier; Leminen (2002) results provided a picture of the child with LD as having a social network that does not differ in size or composition from that of learners without LD. The social domain is one sphere where children with LD feel stronger and see themselves as having potential than in the academic sphere. Among others Grolnick and Ryan (1990) have suggested that areas other than school may function as a source of self-worth for these learners. Westing Allodi (2000) reported that children with low academic self-concept placed more importance to peer relations. However, developing peer relationships depends on the child’s level of social skills, area where learners with LD often have difficulties. Since peers take increasingly crucial roles in shaping identity, classroom interventions focusing on enhancing self-concept should strongly emphasise social skills (Manning, 2007).
6.1.2 Self-concept and Age

As mentioned in chapter 2, self-concept change in the ordinary development of the individual in response to environmental and developmental changes “(e.g. change in physical structure, cognitive abilities as well as many other areas, including academic skills, communication and language skills, and social skills) (Alpay, 2000). For younger children the focus is more on the physical appearance of things, therefore self-perceptions in younger children are likely to be centred on more observable behaviours and characteristics (McMullin & Cairney, 2004). As development proceeds children begin to view and evaluate themselves in comparison to others. Statements about self-image will include emotional, interpersonal references as well as trait labels (Alpay, 2000).

The findings for the present study indicated that there was a difference in self-concept of learners with learning disabilities between younger and older children for both groups regardless of educational setting. Learners between ages 8-10 from a special education group in the present study were as positive about themselves as the regular education learners. Younger children appeared to hold more positive self-concepts than older children. When comparisons were made between learners with LD from primary schools and those in secondary schools, learners with LD from secondary schools scored significantly low on “Intellectual and School “(academic domain) cluster. Similar to the present study, the work of Renick and Harter (1989) found that self-concept decreased with increasing age for children with learning disability.
6.1.3 Self-concept and Gender

Gender studies pertaining self-concept have been widely researched as gender as a sociological variable is assumed to have influence on self-perceptions. Findings from this paper are the replica of several previous studies that used PHCSCS-II as measurement instrument. That is findings from previous research as well as the findings from this study displayed no significant gender differences on overall scale scores. Results depicted that only the “Physical Appearance and Attributes” cluster yielded a significant difference favouring girls. This confirms previous findings and supports the notion that differences in self-concept are at an extent influenced by cultural sex-stereotypes (Crain, 1996). These findings are contrary to those obtained by Beltempo and Achille (1990). Beltempo and Achille (1990) used the same measurement instrument (PHCSCS-II) however their findings suggested that when compared to boys girls with LD held a much lower overall self-concept and thus making them more susceptible to placement effects than boys with LD. However no significant differences on overall self-concept were found in this study. Furthermore, there is also a strong body of evidence that suggests that girls have higher academic self-concept when compared to boys (Chapman, 1988). However, findings from this study failed to produce such findings. This may result from problems in construct validity of the used instrument (PHCSCS-II) as the separate scales lack discriminant validity (Byrne, 1996, p. 108).

Marsh and Holmes (1990) investigated psychometric properties of three instruments (SDQ-I, PCS, and PHCSCS-II) which all are claimed to measure multiple dimensions of self-concept (e.g., physical, academic, and social) and concluded that physical ability and physical appearance could not be adequately incorporated into a single
higher order dimension. They argued that the Piers-Harris physical cluster scale is primarily a physical appearance scale. In this case, it is not surprising that 10-year-old girls in this study rate themselves more positive than boys of the same age. According to Crain (1996) it is not until adolescence that boys start showing higher physical appearance self-concept than girls, who become more dissatisfied with the way they look by increasing age. Perhaps it is socially more acceptable for a young girl to see herself as nice-looking with pretty eyes than for a boy. Physical appearance might also be more important source of self-esteem at this stage of development for girls than for boys who, in the light of research, tend to appreciate physical abilities and skills more (Brown, 1998, p.208). The finding agrees with the notion by Crain (1996) of domain-specific differences in self-concepts of boys and girls.

6.1.4 Self-concept and culture

Learners who took part in this study were also compared with respect to their cultures/ethnicity. The findings suggested that there were differences in overall self-concept of learners with LD from different cultural groups; however such differences were not that significant.

Black learners with LD obtained high scores in the “Popularity” cluster when compared to the other groups. This suggested that black learners had no problems with peer acceptance and forming meaningful social relationships with their peers regardless of the difficulties they might have in learning. However, all groups scored significantly low on “Behaviour” sub-scale.
6.2 Limitations of this study

One would agree that it is a known fact that no study is without limitations, therefore the limitations of the present study will be discussed below. Recommendations for future research in line with these limitations are also provided.

- The first limitation of the present study was the broadness of the subjects. While learning disabilities have a variety of types (reading, written expression, mathematics and learning disabilities not otherwise specified), LD was not categorise in any sub-types in the present study. Furthermore, self-concept was measured on a broader scale with minimal sub typing of different aspects of self.

- A relatively small sample size with only 126 participants was used in the present study. This makes it virtually impossible for a generalisation of the findings to apply to the entire population of learners with LD. The sample was also restricted to only one province (Kwazulu Natal province) and not all the districts in this province formed part of this study. A large number of sample sizes should be employed in future research as this will enhance the generalisability of results as well as aid in the accuracy of statistical analysis.

- Data collection only relied on one method, the use of Piers Harris Children Self-concept scale. This may have been a restriction in terms of acquiring rich data which could have been easily accumulated should another method such as semi-structured questionnaires have been employed. Furthermore, interviews with the participants as well as parental and teacher reports would have been useful in adding richness in the data but this was not possible due to time constraints. Future research on the topic should advocate for a more
comprehensive data collection methods. In order to gain more insight on the experiences of learners with LD in different educational settings and the affect this has on their self-concept open ended questions should also be employed in future studies.

- The sample in the present study was drawn by means of convenience sampling and this might have led to possible selection bias. That is not all learners with learning disabilities in Kwazulu Natal Province were represented in the present study. Therefore, caution should be taken when generalising the outcomes. A stratified random sampling method should be considered as an alternative so as to enable the researcher to make broader generalisations with regards to future studies outcomes.

- This study failed to gather demographic data pertaining to socio-economic status of the learners who took part. Future research should ensure that the (SES) variable included in their analysis.

- Lastly, the literature review pertaining to this study is not applicable across cultures. Most research reviewed was conducted abroad.

6.3 Conclusions and implications for future research

In research on children, very few topics have evoked much interest or controversy as those pertaining to the self-concept of learners with LD. Especially those studies that compare learners with LD in different educational settings. Previous studies on the topic have yielded equivocal findings. The findings in the present study suggests that when comparisons were made between learners with LD in special schools and those in regular schools, the special class group obtained more positive scores in overall self-concept. Several possible explanations can be offered pertaining to why
learners with LD in the special education group display such competitive self-concepts regardless of the number of odd assumed to be against it.

In a study conducted by Jordan and Perot (1998) they proposed that educating learners with LD in special educational classes may have certain characteristics which may contribute to positive self-concept for learners with LD. For instance, learners with LD in special educational classes are assumed to be receiving more guidance, support and positive teacher feedback after their difficulties in learning have been identified. Positive re-enforcement, academic success, less competitive atmosphere, individual attention and close learner teacher relationships often associated with special education environment may have significant impact in constructing positive self-concept. Thus it can be assumed that special education teachers are trained professional who possess adequate skills or strategies which support the instruction and evaluation of the multidimensional ability of learners. The role played by teachers in school children is assumed to be very significant role in the development of self-perceptions in children and with positive feedback they can help enhance the self-concept of learners with LD. Whereas in a regular class the learning goals and comparisons of achievement are more central.

Chapman (1988) in her review summarised that learners with LD in regular educational settings have relatively lower academic self-concept than those in special school settings because of the significant role played by teachers and how such can influence learner’s self-perception. Educators play an important role in labelling the learners and unanimously attach certain effective meanings to these labels and hold stereotyped views of labelled children (Leminen, 2002). Learner’s perceptions of school achievement in relation to educator’s perceptions of their condition can also influence how learners will value and evaluate their performance
(Moberg, 1979, p.16). Jordan and Stanovich (2001) also noted that educators held different beliefs on their accountability for learners with difficulties in learning and that such attitudes and beliefs were related to their teaching strategies with different learners. Furthermore, there is still a need for general education educators to be trained and equipped with the necessary skills and strategies on how to educate and manage learners experiencing academic difficulties.

It is clear that learners come to school with different expectations and ideas about themselves and their capabilities. School has been assumed to play a crucial role in the socialisation process of children; hence it is also critical for one to understand the influence that school has in shaping the perceptions that children have about themselves, thus building and marking self-concept in numerous ways. With respect to the results from the present study, one can assume that the special education facilities have lived up to their expectations set for them. They have been able to create an environment and atmosphere which helps the learners to develop positive, healthy self-concepts. This is a positive finding in relation to concerns of many parents about stigmas associated with special education, and for those who support the idea of separate classes to meet various needs of learners.

Raviv and Stone (1991) proposed that parental expectations and attitudes may affect the self-concept more than the actual learning difficulty. This is consistent with Harter’s (1996) view that high support from parents increases student’s self-concept. One possible area of research in the future would be to study how persistent effect parental expectations have on children’s self-concept. What kind of meanings children give to their own parents’ attitudes and opinions toward learning disabilities or special education placements, how parents support their children who experience learning difficulties. Emotional support from immediate family members seems to
protect both children with and without learning problems from negative classroom environments and negative aspects of their friendships (Wenz-Gross & Siperstein, 1997).

The main objective of this study was to examine the impact of different educational settings on self-concept of learners with LD. Out of three educational settings examined or explored none proved to be significantly better or worse than the other. Comparisons on learner’s self-concept scores indicated that the educational framework was not systematically associated with differences in self-concept. Special education settings did not automatically result to lower self-concept when compared to mainstream settings. However the findings showed that unidentified and unplaced learners with difficulties “learning disabled” had lower self-concept than their counterparts receiving remedial assistance.

Chapman (1988b) and Renick and Harter (1989) concluded the Piers-Harris Children’s Self-Concept Scale-II (Piers, 1984) to be an inadequate measure of academic self-concept, and therefore not being a multidimensional instrument. Chapman continued by arguing that research should focus more on the structure and content rather than on the level of these learners’ self-perception, and focus into how motivational, social, and classroom factors are related to the development of self-concept. In addition, attention needs to be paid to methodological issues and to definitions and accuracy of terms such as learning disability in order to specify and focus research better. More caution must also be exercised in selection of comparison groups.

With respect to future research it is important to follow how the self-concept of the children develops and changes over time. Only longitudinal studies can reveal how
different risk factors such as learning difficulty, special class placement, labels, teaching strategies, or parental support may affect the self-concept. What kind of strategies children with LD use in building up a healthy self-esteem and realistic self-image, how do they compensate for the lack of success in the academic field, and where do they draw the self-worth from as the aspect of self-concept is particularly important in decisions concerning where children with learning difficulties receive the best education.
References


Gwala, Q.V. (2006). *Challenges facing the implementation of inclusive education in primary schools*. An unpublished research report submitted in fulfillment of the requirements for the Master’s degree in the department of Educational Psychology at the University of Zululand.


Leminen, A. (2002). *Self-concept of children in special and regular education*. An unpublished report submitted in partial fulfilment as a requirement for postgradu research in the Department of Special Education at the University of Jyväskylä


31 January 2012
Head: Education
Private Bag X 9137
Pietermaritzburg
3200
Dear Sir or Madam

**RE: PERMISSION TO CONDUCT RESEARCH**

I am presently undertaking my Masters degree in Educational Psychology at the University of Zululand. Part of my course requirement is the completion of research report which I am currently doing under the supervision of Dr S Govender and Professor M.M Hlongwane, to complete my thesis entitled:

*The Self-concept of Learners with Learning Disabilities in Different Educational Settings.*

The self-concept of learners who are having difficulty with learning is an important subject of research as positive self-concept is thought to be a crucial factor in influencing the individuals academic achievement, resilience and ability to form meaningful relationships. Previous research conducted on a similar topic indicates that learners with learning disabilities commonly have negative self-concepts than learners without LD. However, the findings from this broad body of research indicate both controversial and inconsistent conclusions.

Therefore, further research into this field is necessary. Little research (to the researcher’s knowledge) focusing specifically on the self-concept of learners with learning disabilities in different educational settings have been conducted within the South African context. Therefore the need to assess the self-concept reported by this population is of great importance.

Should the parents or guardians give their consent, assenting children will be asked to complete a short biographical questionnaire and a child-friendly survey relating to their self-
concept (please see attached proposal for further detail). This assessment will be done on one occasion during school hours and shouldn’t take longer than an hour. The data obtained will be used to make comparisons between the self-concept of learners with learning disabilities in special schools and mainstream schools. To make these comparisons content, number, pattern and level of self-concept will be investigated.

I hereby request permission to conduct research between May and June 2012 in the schools surrounding Amajuba and Empangeni districts:

The following conditions will be adhered to:

1. The principals/teachers/learners are under no obligation to assist in this investigation.

2. The principals/learners/schools should not in any way be identified from the results of the investigation.

3. All arrangements concerning this investigation will be done personally.

4. The conditions, as stated in 1-3 above, will be submitted unimpeded to the school principal where the intended research is to be conducted.

5. A brief summary and completed thesis will be provided to the director: Curriculum Management (Research Section).

Thank you for considering my application. Please find attached the application form to conduct research as per your department’s requirements.

Yours Sincerely

Siphelele S. Makhubu (Miss)  Dr S. Govender Supervisor

Professor M.M Hlongwane Co- Supervisor
APPENDIX B

Enquiries: Sibusiso Aher
Tel: 033 341 8610
Ref: 24/3/195

Siphelele Sanele Makhubu
P.O. Box 17615
OSIZWENI
2952

Dear Siphelele

PERMISSION TO CONDUCT RESEARCH IN THE KZN DEPARTMENT OF EDUCATION

Your application to conduct research entitled: A Comparative Study on the Self-Concept of Learners with Learning Disabilities in Different Educational Settings, in the KwaZulu-Natal Department of Education Institutions has been approved. The conditions of the approval are as follows:

1. The researcher will make all the arrangements concerning the research and interviews.
2. The researcher must ensure that Educator and learning programmes are not interrupted.
3. Interviews are not conducted during the time of writing examinations in schools.
4. Learners, Educators, Schools and Institutions are not identifiable in any way from the results of the research.
5. A copy of this letter is submitted to District Managers, Principals and Heads of Institutions where the intended research and interviews are to be conducted.
6. The period of investigation is limited to the period from 01 May 2012 to 31 August 2013.
7. Your research and interviews will be limited to the schools you have proposed and approved by the Head of Department. Please note that Principals, Educators, Departmental Officials and Learners are under no obligation to participate or assist you in your investigation.
8. Should you wish to extend the period of your survey at the school(s), please contact Mr. Alwar at the contact numbers below.
9. Upon completion of the research, a brief summary of the findings, recommendations or a full report / dissertation / thesis must be submitted to the research office of the Department. Please address it to The Director-Resources Planning, Private Bag X9137, Pietermaritzburg, 3200.
10. Please note that your research and interviews will be limited to the schools in the Amajuba and Empangeni Districts.

Nkosazathi S.P. Sithi, PhD
Head of Department: Education

2013/06/11

...dedicated to service and performance beyond the call of duty.

KWAZULU-NATAL DEPARTMENT OF EDUCATION

POSTAL: Private Bag X9137, Pietermaritzburg, 3200, KwaZulu-Natal, Republic of South Africa
PHYSICAL: Office 2.05, 180 Pietermaritz Street, Metropolitan Building, Pietermaritzburg 3201
TEL: Tel: +27 33 341 8610 | Fax: +27 33 341 8612 | Email: sibusiso.aher@kzn.doe.gov.za
Web: www.kwazulu.natal.gov.za

116
Dear Principal,

Re: Proposed Research at your School

I am currently doing my Masters degree in education at the University of Zululand. As part of the course requirements I have to complete a research report, which I am currently undertaking under the supervision of Dr. S Govender and Professor M.M Hlongwane from the department of Educational Psychology. My research project is in the field of self-concept (self-esteem) of learners experiencing difficulties with learning (Reading/Spelling, Writing and Mathematics).

The self-concept of children experiencing difficulties with learning is an important subject of research as positive self-concept is thought to be a crucial factor in influencing the individual’s academic achievement, resilience and ability to form meaningful relationships. I endeavour to gain insight in children’s feelings and ideas about themselves. I would like to ask [Name of the School] to participate in this research project. I believe that the information obtained from the assessments conducted could be beneficial for parents and schools. The results of the assessment will help identify areas of learning strength as well as areas that need development in a child. The research will also provide information with regard to the self-concept of children with learning disabilities.

The procedure for this research project will be as follows.

1. An initial interview with parent(s) to obtain consent as well as medical, family and academic information about the child.
2. The child will be assessed during school time on a day arranged with the school and parents. The following instrument will be used to obtain data:

   The **Piers Harris Children Self-Concept Scale (II)**, which gives information on the following six areas of self-concept:

   - Physical Appearance and Attributes
   - Intellectual and School Status
   - Happiness and Satisfaction
   - Freedom and Anxiety
- Behavioural Adjustment
- Popularity

3. The results of the above assessment will be conveyed individually to the school principals.

4. This report will be given to school with a written consent of the parents. This will be suggested to parents as the information may assist the school in planning educational interventions for children with learning disabilities.

If you have any questions at any stage during the course of this research, please feel free to contact me.

Thank you for your time and consideration.

The participation of [Name] School is much appreciated.

Yours sincerely,

______________________

Siphelele Makhubu
Dear Parents

I am currently doing my Masters degree in education at the University of Zululand. As part of the course requirements I have to complete a research report, which I am currently undertaking under the supervision of Dr. S Govender and Professor M.M Hlongwane from the department of Educational Psychology. My research project is in the field of self-concept (self-esteem) of learners experiencing difficulties with learning (Reading/Spelling, Writing and Mathematics).

The self-concept of children experiencing difficulties with learning is an important subject of research as positive self-concept is thought to be a crucial factor in influencing the individual’s academic achievement, resilience and ability to form meaningful relationships. I endeavour to gain insight in children’s feelings and ideas about themselves.

[Name of the School] has agreed to participate in this research project because the information obtained from the assessments conducted could be beneficial for parents and schools. The results of the assessment could help identify areas of learning strength as well as areas that need development in the child. The research will also provide information with regard to the self-concept of children with learning disabilities. I do not anticipate any risks with regard to this research. It will be explained to the child that I’m seeing a number of children in order to find out what they are good at and what they need help with at school in order to find ways to assist them.

Participation is voluntary and much appreciated.

Anything you write down or say will remain confidential and anonymity will be safeguarded. All related documentation will be stored securely. The child’s identity will not be revealed in the research report.

The results of the psycho-educational assessment of your child will only be shared with [Name] school with your written consent.

The procedure for this research project will be as follows.

1. An initial interview with parent(s) to obtain background medical, family and academic information about the child.
2. The child will be assessed during school time on a day arranged with the school and parents. The following instrument will be used to obtain data:

The **Piers Harris Children Self-Concept Scale (II)**, which gives information on the following six areas of self-concept:

- Physical Appearance and Attributes
- Intellectual and School Status
- Happiness and Satisfaction
- Freedom and Anxiety
- Behavioural Adjustment
- Popularity

3. The results of the above assessment will be conveyed individually to the parents (to be arranged after the assessment day), together with a written report.

4. This report will be given to school with a written consent of the parents. This will be suggested to parents as the information may assist the school in planning educational interventions for the child.

As the parent/guardian of a child with difficulties in learning it is your responsibility to sign and return the attached informed consent form if you would let your child participate in the study. Please, if you do not feel comfortable do not feel obliged to let your child take part in the research. No adverse consequences will result for your child if he/she does not take part. If you have any questions at any stage during the course of this research, please feel free to contact me.

Thank you for your time and consideration.

Yours sincerely,

__________________________

Siphelele Makhubu